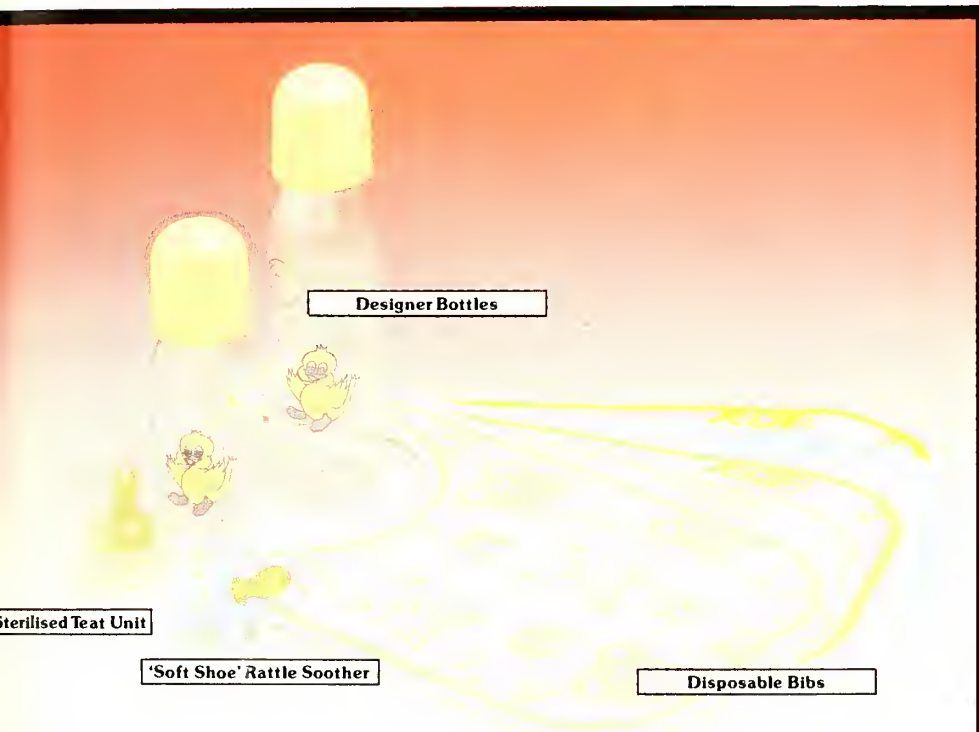


# CHEMIST & DRUGGIST

the newsweekly for pharmacy

May 12, 1990



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## Crookes boycott by Liverpool pharmacies..

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## Boots' letters: no objection

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## Core syllabus for continuing education?

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## Patients back on ABPI agenda

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## OTC medicines: aches and sprains

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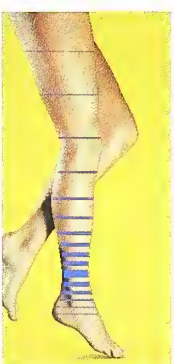
## Macarthy take on Jersey pharmacies

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# **WHY 86% OF PHARMACISTS DISPENSE SCHOLL.\***

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**THE LEADING NAME IN COMPRESSION HOSIERY**  
\*Independent Retail Audit, Autumn 1989.





# CHEMIST & DRUGGIST

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# COMMENT

It seems that at long last, pharmacists have a relatively simple means of determining whether the imported pharmaceutical product they may be holding in their hand or are being offered for sale is "legitimate" ie licensed.

The Royal Pharmaceutical Society has confirmed to C&D this week that it is in possession of a computerised list of PL(Pi)s (Product Licence (Parallel Importing) which states product licence number, company holding the licence, the name of the product in which the licence is held, the source of origin for which the licence is granted, and EC marketing authorisation number. So pick up the phone to the Society and ask.

Pharmacists should note this is not the same as the list the licensing authority has made available since PIs were first licensed back in 1985 and which has been regularly updated in the Medicines Act Information Letter (MAIL). This second list names the products licensed by brand name and the sources from which importation has been licensed. It does not say who has licensed what, or from

where, and is little short of useless.

As the enforcement authority, the Society has every right to expect to be given the information it requires to do its job properly. It remains to be seen whether the list will become available for wider publication. Life would be easier if the list could be provided to pharmacists on a regular basis so that those who use PIs could have the information they need to do so lawfully.

Of course, it could be argued that when a pharmacist receives a product from a UK manufacturer it too bears a licence number which the pharmacist might have difficulty in checking. The *bona fides* of most manufacturing pharmaceutical companies has long been established. The reputation of many of the importers is now firmly established, too, but the court proceedings taken against a number of importers over recent years mean that pharmacists still have to be careful if they are to keep within the law.

At least now, a simple call to Lambeth — don't forget the 071 — could put minds finally at rest.



# Liverpool pharmacists boycott Crookes

Independent pharmacists in Liverpool are taking Crookes products off their shelves and selling alternatives to customers, in protest at the activities of representatives of Crookes' parent Boots in seeking to gain prescription business from residential homes in the area.

Those taking part in the action are writing to Crookes to explain their action. In a letter addressed to the pharmacy sales director, a copy of which has been sent to *C&D*, the pharmacists say: "All Crookes products will be removed from display. Any customers requesting them will be offered an alternative brand (probably at a price advantage to them and a financial advantage to us). Only those customers insisting on a Crookes product will receive one."

"Our direct account with Crookes will not be used, no matter how good the bonuses. As Crookes lines run out, they will be de-stocked and replaced. Eventually, no Crookes products

will remain in stock and that situation will continue for as long as Boots persist in their promotional activities to residential and nursing homes in the Liverpool area."

One of the organisers of the action, John Donoghue, told *C&D*: "Independent contractors don't feel that Boots are adhering to the Society's guidelines, in particular that homes already receiving an adequate service from a pharmacy should be left alone."

At LPC meetings independent contractors had tried raising the matter with the Boots representatives but had been met with "stalling tactics" and delay after delay.

"After the last LPC meeting the independent contractors felt rather aggrieved and a number of us decided to take matters into our own hands," Mr Donoghue said. Since then, he and his colleagues have been in contact with nearly all of the hundred-plus

independent contractors in Liverpool; so far only three have said they will not support the action.

Mr Donoghue said that Crookes' area representative had visited him last Thursday and said she had not received a single order that week. He has also been in contact with other pharmacists who support the action being taken in Liverpool, and are looking to organise similar protests.

Mr Donoghue points out that the LPC itself is not involved. The question of a boycott has not been discussed by the LPC, though most of the organisers of the protest happen to be LPC members. Mr Donoghue himself was reporting the action to the LPC at its meeting on Thursday after *C&D* went to press.

On Tuesday, Crookes Healthcare's sales director John Edwards told *C&D* the company had not yet received a copy of the letter. No further comment was available as *C&D* went to press.



"OK. Have you got enough space for that controlled dosage system now, or do you need more?"

## NSAID alert for pharmacists

Pharmacists should be on the alert for patients who buy over the counter anti-inflammatory agents in addition to those prescribed by their GP says a consultant physician. Bleeding ulcers are often caused by patients adding OTC NSAIDs to those prescribed by their GP says Dr John Bennett from Hull Royal Infirmary.

"The danger is when the patient who is on prescribed NSAIDs goes and buys an over the counter NSAID then suffers a bleed and needs emergency treatment in hospital. I have seen quite a few of these in recent years," he said.

Each year around 12,000 people were admitted to hospital

with a haemorrhage in the gut and half of those were due to ulcers. Pharmacists were in an ideal position to advise people of the dangers of adding OTC NSAIDs to their prescribed drugs.

It would be too expensive to prescribe prophylactic H<sub>2</sub> antagonists to everyone on an NSAID, said Dr Bennett.

## Society has the PL(PI) list

The Royal Pharmaceutical Society has now received a comprehensive list of parallel import licences PL(PI)s from the Medicines Control Agency, as agreed, so that the Society can properly exercise its duties of enforcing the Medicines Act (see *C&D* April 28).

The computer listing contains details of importers, PL(PI) numbers, product sources and European Community Marketing Authorisation numbers (ECMA). And the Society says it will be happy to take telephone calls from pharmacists wishing to confirm that products they propose to buy or supply are licensed.

The development is at least an improvement on the list published in the Medicines Act Information Newsletter which gives product names and sources only for parallel imported medicines. *C&D* published an earlier version of the list in its parallel importing supplement in April 1986 as an adjunct to its list of PL(PI) numbers. But a list which gives names and sources by itself is no good to pharmacists wanting to make sure a product is licensed as they are required to do by the RPSGB's Code of Practice.

The RPSGB has itself recently published a version of the products and sources list as it stood at February 8, but says that even though it has been supplied with updates, it cannot publish them. Indeed the Society admits the limitations of the published list saying "if a product cannot be found pharmacists should not assume that it is not licensed but should check either with the MCA or the Society".

## No NHS alternative!

Baroness Hooper, the junior Health Minister, has reaffirmed that the Department of Health does not recognise the qualifications of practitioners of alternative and complementary therapies, and that only those practitioners who are registered with the General Medical Council are eligible to work in the NHS.

"The Department's stance is that it has no wish to restrict the practice of alternative and complementary therapists including practitioners in herbal medicines, who are thus free to offer their services privately, subject to those provisions of statute and civil law which apply"



## Vallergan recall

Rhône-Poulenc are recalling Vallergan tablets 10mg in 28-tablet packs (PL12/5303R), batch DD 1220, manufactured in July 1989 with an expiry date July 1991.

The company says an error has been detected in the printing of the foil used in the batch, which was distributed from the Dagenham factory between March 23 and May 3. The tablets themselves are satisfactory and the recall is a precautionary measure.

The company is asking pharmacists to examine their stocks and return any of the named batch to Rhône-Poulenc Ltd, Dagenham, marked "for the attention of Mr G. Foster, Returned Goods Store" enclosing the name of your wholesaler.

## Cholera jabs

There has been a shortage of Wellcome cholera vaccine BP (1.5ml vials). In order to meet demand a quantity of cholera vaccine BP, manufactured by Institut Mérieux, France is to be distributed.

The carton and ampoule label for this vaccine are identified by a red panel, and the phrase "revised strength and dose". The vaccine is in an ampoule, containing 0.5ml, which is the volume required for a single dose for adults and children over ten.

**Nearly 800 representatives** of family practitioner committees and health authorities in England, Wales and Northern Ireland have now received papers enabling their authorities to vote for the setting up of the National Association of Health Authorities and Trusts.

## Script checks reveal 0.05pc underpayment

During 1989-90 the National Prescription Research Centre checked three million prescriptions worth £17.26m and found an overall cash error of 0.049 per cent underpaid. The Department of Health has agreed to correct the underpayment as in previous years.

During the year, a new computerised method of checking was put in place, the setting up of which meant a reduction in the

number of scripts checked from 2 per cent of the total to 1 per cent. The NPRC reports that it is now back to checking 2 per cent of all scripts in England and Wales.

In the year to March 31, 1990, the NPRC also checked over 1.16 million prescriptions as special checks on behalf of 210 contractors. The total value of the scripts was £6.96m and the NPRC found an average 0.068 per cent underpayment.

# Patents return to top industry agenda

The European Commission proposals for patent term restoration have put the patent issue firmly back at the top of the Association of the British Pharmaceutical Industry's agenda.

The subject dominated the speech of the ABPI president Mr John Farrant to the Association's annual dinner at the Grosvenor House last Thursday. Mr Farrant told guest of honour Health Secretary Kenneth Clarke that the Commission's recent proposals to restore some of the protection period lost through the increasing development, testing and licensing times will "put innovative pharmaceutical companies back, at last, on equal terms with their counterparts in the United States and Japan, whose Governments have already acted so that pharmaceutical research continues to thrive in those countries".

Mr Farrant said that not only were the proposals important to the industry, they are also important to the British economy. "Pharmaceutical exports exceed £2,000 million per annum. British medicines have achieved outstanding success in all the major international markets."

He quoted Mr Clarke's off the cuff comments in a Commons Committee when he referred to the need to protect intellectual property rights. "We hope that the Government will actively support these European proposals to enable our companies to compete on the same terms as our main rivals," he said.

In his response, Health Secretary Kenneth Clarke shielded away from outright Government



Health Secretary Kenneth Clarke (left) chats with Dr John Griffin, director (centre), and John Farrant, president of the Association of the British Pharmaceutical Industry, before the ABPI's annual dinner at the Grosvenor House, London, last Thursday.

backing for the Commission's scheme.

"Before reaching a conclusion on the patent proposals I will therefore want to study the evidence being put forward to ensure that here, as elsewhere, there is a fair balance between the proper recognition of the industry's position and the best use of resources in the health care system," Mr Clarke said.

While the Government fully recognises the importance of intellectual property rights, Mr Clarke said. "I don't need persuading that without proper protection, there will be no incentive for companies to go to the major expense of developing new drugs." There may be scope however, on where to draw the line between protecting the developer and encouraging competition.

Kenneth Clarke, the Secretary for Health, chose the pharmaceutical industry's annual dinner to launch a further attempt to get across the concept of indicative budgets with the publication of a further Working Paper.

"It consolidates, yet again I would say, the reassurances that my colleagues and I have been at pains to give and I sincerely hope finally lays to rest the misunderstandings that have abounded."

Mr Clarke said the new

Working Paper reiterates that there will be no new sanction for simply exceeding the indicative prescribing amount given to a practice. "Sanctions for prescribing in excess of need will remain and will be modernised to give the FPCs a role in the procedure. Judgments will be based on the findings of an all-professional committee to ensure they are professionally reputable."

Mr Clarke said each FPC was being given the funds to employ a full-time medical advisor who would be backed up by a national advice and training centre staffed by doctors.

Mr Clarke also gave further details of the national medicines resource centre for the NHS (MeReC), based in Mersey RHA but he did little to calm fears that the Centre would be used to reduce prescribing costs by producing a *quasi* "national formulary".

He said the centre would produce regular bulletins for GPs incorporating professional advice on medicinal products and prescribing practice.

"The emphasis will be on encouraging rational, safe and cost-effective prescribing. The Bulletins will supplement rather than supplant the existing sources of information available to doctors on prescribing matters," Mr Clarke said.



## Council not to object to Boots' letters to homes

The Royal Pharmaceutical Society's Council has decided not to object to the wording of four letters sent by Boots to residential homes and one sent to GPs once a home had accepted the Boots monitored dosage system.

The Ethics Committee has considered the text of a number of letters used by Boots at various stages of their campaign to

promote services to residential homes. The Committee expressed disquiet at the company's approach and accepted that it would lead to energetic efforts by other pharmacists to promote their own services.

Further consideration will be given to the wording of a letter the company sent to regional pharmaceutical officers.

## Vaccine efficiency

Mrs Virginia Bottomley, the Health Minister, told Mr Jack Ashley (Lab) in the Commons last week that the estimated efficacy of the current British whooping cough vaccine in preventing clinically typical disease was 80 per cent.

She said the figure derived from a national study carried out in England and Wales in 1978-80.

The Minister refused to disclose what changes there had

been in the nature of the whooping cough vaccine since it was first recommended for general use by the Department of Health.

She stated: "For reasons of commercial confidentiality it is not the practice of the Department to disclose information about commercial products. Requests for such information about licensed products should be made directly to the company holding the licence".

### PSNI COUNCIL

## Input sought on new Agency

The president of the Pharmaceutical Society of Northern Ireland Mr Ronnie McMullan and the vice-president are to write to the Department of Health and Social Services expressing the opinion that pharmacy should have an input to the new Northern Ireland Health Promotion Agency.

The Council meeting that agreed this approach was conducted without the secretary and registrar Derek Lawson. Mr McMullan said that the members would be very sad to learn that Mr Lawson had had a mild heart attack on Easter Sunday night. He was now making good progress and would be home soon, Mr McMullan hoped.

Mr Terry Hannawin, chairman of the Finance and House Committee, produced a cash flow projection of the Society's financial situation for the forthcoming year. Mr Hannawin and honorary treasurer Mr Robert Dillon were delegated to investigate the best interest rate that could be obtained for the Society.

Dr Terry Maguire reported

that some definite proposals are likely in due course from the DHSS on the changes to the Post-qualification Education and Training Subcommittee. Dr Maguire had recently attended a meeting with the DHSS on behalf of the Society.

The Council is to obtain copies of the paper "Working for patients — education and training in Northern Ireland" for consideration by the Education Committee.

The following applications for registration as students were approved:

Mark Edward Cleland, 1 Rockmount Park, Middle Road, Saintfield  
Julie Elaine Fitzell, 12 Glenhugh Crescent, Belfast  
Tracey O'Hanlon, 68 Cloughreagh Park, Bessbrook  
Fionnuala Mairaed Regan, 6 Innisfayle Road, Belfast.

The application of Mary Elizabeth McPherson, 124 Lavender Avenue, Coventry was accepted under the reciprocal agreement between the Great Britain and Northern Ireland Societies.

## Pharmacies give out sharps containers

The Executive of the Pharmaceutical Society's Scottish Department heard at last month's meeting how Scottish pharmacists were helping to reduce the spread of HIV infection among drug addicts.

Argyll and Clyde Health Board has made arrangements for the supply of disposal containers to addicts via community pharmacies and for the safe disposal of addicts' containers through Rentokil. The Lothian chief administrative pharmaceutical officer had written to say that the manufacturer of the Glenrithes telescope disposal tubes was to circulate a descriptive leaflet to pharmacists in Lothian and it had been suggested that additional copies be sent to other Scottish CAPOs.

Forth Valley CAPO said a number of pharmacies in the area were handing out sharps containers free to addicts buying syringes and needles. There had been a poor response to the request for GPs to hand containers to their drug addict patients and only three practices were doing so.

The Scottish Home and Health Department has been asked for information on the effectiveness of both pharmacy and non-pharmacy based schemes. The Executive has re-iterated the point that Boards should have the flexibility to provide free needles and syringes to drug addicts and that, when supplied by pharmacists, the packs should also contain condoms and advice leaflets.

**Future of APCs** The secretary has written to the SHHD chief pharmacist about the Executive's concern over the future of area pharmaceutical committees in the light of the proposal in the NHS and Community Care Bill for local consultative committees in Scotland to be recognised by Health Boards instead of the Secretary of State. The points were made that the NHS reform enhanced the need for pharmaceutical advice to the new management structures; that the Executive worried about any reduction in professional pharmaceutical advice to the new Health Boards and believed that professional advice was best provided by independent pharmaceutical committees rather than by multi-disciplinary ones.

**Glasgow CAPO** Glasgow Health Board has stated it would be happy to have independent professional pharmaceutical advice in the appointment of the CAPO post provided that the Society was suggesting someone

at least equal in seniority to the advertised post. The Executive agreed to suggest two names from which the Board could choose a nominee.

**GP dispensing at Gardenstown** The interim collection and delivery service set up at Gardenstown following the death of the local pharmacist ceased on March 23. As attempts to provide an alternative pharmaceutical service had failed, arrangements had been made with the local GP to provide a dispensing service.

**Residential homes scheme** There has been an improvement in the uptake of contracts for residential homes and patient medication record schemes. It would take some time to establish the level of demand for contracts. Many Boards have instituted a mechanism for sending out claim forms to contractors. In effect the official definition of a home covered all Health Board registered private nursing homes and local authority or local authority registered residential care homes.

**Home inspection units** The Executive considered a consultation paper on the setting up of inspection units for residential homes and agreed to tell the Scottish Office that pharmaceutical expertise should be used.

**Hazardous substances** It was reported that environmental health officers were visiting community pharmacists and may be asking what steps are being taken in the light of the new Control of Substances Hazardous to Health Regulations (COSHH), 1988. The Executive agreed that, while the Society's inspectorate did not enforce the COSHH Regulations, the inspectors could helpfully remind community pharmacists of their position under the Regulations.

**Training on formulary management** A letter will be sent to the Scottish Post Qualification Education Board regarding the training needs for community pharmacists in formulary management and interpretation of Scottish Prescribing Analysis data.

**Role in hospices** A letter will be sent to the SHHD seeking confirmation of a continuing role for pharmacy contractors in providing advice and supplies to hospices. The decision followed a discussion of NHS Circular No 1990 (GEN)12 concerning services for terminally ill patients. It had been agreed that all hospices to which the circular applied should be able to obtain pharmaceutical services from NHS hospital pharmacies.



## 'Struck off' pharmacist dispensed

A pharmacist who had been struck off for misconduct found himself in a quandary when his only pharmacist had to go home following an armed drugs raid in his South West London shop.

And what happened next landed him in trouble with police. For he then dispensed 21 prescriptions even though he knew he was acting unlawfully. Camberwell magistrates heard last week.

Ronald Ribolla, of Park Avenue, East Ewell, Surrey, admitted four charges of supplying drugs in the absence of a pharmacist at his pharmacy at Barrett House, Ramsey Road, Brixton, on September 29 last year. He also asked for 17 similar offences committed on the same day to be taken into consideration.

Mr Edward Soden-Bird, prosecuting, said Mr Ribolla had been a qualified pharmacist but was struck off in April last year for misconduct. About five months later his shop was raided at midday by three men during which his pharmacist was the victim and had to go home ill. Unable to get a replacement pharmacist the same day Mr Ribolla kept the premises open and dispensed prescriptions for a "large number of people" even though he knew he was doing wrong.

Questioned by police Mr Ribolla was very co-operative and said that 152 prescriptions were dispensed on the day of the robbery, but he was unable to say precisely how many he had done.

Detective Sergeant Ivor Glyn of the Central Drug Squad said Mr Ribolla was a man of previous good character and had purchased his shop six years ago. He agreed that all the prescriptions were genuine and said Ribolla had taken a chance when he dispensed them.

Mr Jonathan Fisher, defending, said after being struck off last year for an ethical matter, Mr Ribolla had to employ a pharmacist at his shop. And when she went sick after the robbery he had taken over dispensing though his motivation was "genuine and not commercial".

Fining Mr Ribolla £300 on each charge with £60 costs, stipendiary magistrate Mr Geoffrey Breen accepted that he had "succumbed to temptation" after sending his pharmacist home, but added: "If you come before this court again you will be dealt with in the utmost severity".

# TOPICAL REFLECTIONS

by Xrayser

## Cash on delivery?

I deliver medicines to many elderly people but, whereas I make it clear that a delivery service is freely available, I would prefer that they remain active and collect their medicines personally from the pharmacy. One of my regular patients phoned me apologetically because, having asked the surgery for her repeat prescription, found the medicines delivered to her by another pharmacy the next day. The prescription had been written as usual but, without the patient's permission, had been sent to this other pharmacy for dispensing and delivery.

With limited nurse prescribing these "arrangements" will become even more common, and though they may be justified as "helping the patient", should only be offered as a service and not imposed. It may be in the commercial interest of a pharmacist to encourage surgeries to co-operate, but it is clearly a breach of the Code of Ethics, removes the freedom of choice from the patient and, more importantly, discourages the elderly from living actively in the community.

## Cost of education

The Pharmacy Healthcare secretariat of the Royal Pharmaceutical Society has done a good job in supplying consistently high quality patient information leaflets for distribution through community pharmacies. The long term benefit in reinforcing our advisory role in the High Street is assured, and unlike posters, the space requirement has been minimal.

Amidst the congratulations, however, a word of caution. In my shop space is at a premium, and for this educational role to be extended any further a realistic payment must be negotiated. I have



recently had a heavy rise in both rent and rates and this must be reflected in the gross earnings of every precious square foot of space. Status may increase my professional pride, but financial realities must limit my co-operation in further advisory functions unless these can be matched by compensatory financial agreements.

It is now up to the Society and PSNC to ensure deeds as well as words from a particularly parsimonious Government.

## Tariff prisoner?

We very rarely dispense scripts for ergometrine tablets, but when required, it is a drug that is needed quickly. The other day I threw away 50 out-of-date tablets and re-ordered, but then checked the Tariff. Why cannot we claim broken bulk on a so little used preparation? And why is there a category "A" at all?

The Prescription Pricing Authority is now computerised and impressively so, so why cannot a claim for broken bulk be acceptable for *all* Drug Tariff items, and then the usage control left to the computers? I lost £4 of ergometrine down the sink, but re-ordered because I consider it my professional responsibility. I should be reimbursed fully for a reasonable claim. The Pharmaceutical Services Negotiating Committee should have category "A" removed *now*!

## Hot flush!

Last week Summer arrived, early and with a vengeance. Everyone in the shop was wilting, but my sun tan preps streaked out. And the hayfever season has started even earlier than last year. All in all an excellent week's trading.

A little sunshine always loosens the purse strings — a lot of sunshine brings a smile even to my friend in the cupboard!



# COUNTERPOINTS

## Scholl backs Limmits with campaign

Limits, will be supported with a £380,000 Press advertising campaign in the national women's Press starting this month.

The campaign will run through to October in national women's magazines and the specialist slimming press with the message "Most diets promise to change your life — Limits promise not to" — the double page spread focuses on both the taste benefits and convenient aspects of Limits say *Scholl Consumer Products*. Tel: 071-253 2030.

## Extra-value Dettol give-away

The Dettol range is giving consumers extra value for money from this month through to the end of June.

There are two promotions from Reckitt & Colman: the first is on packs of Dettol liquid. Each 250ml bottle will give one free Dettol antiseptic wipe, and 500ml and 750ml bottles provide two complimentary wipes.

Dettol soap, normally 100g, has been increased to 125g. These extra content packs are the second promotion from *Reckitt & Colman Pharmaceuticals*. Tel: 0482 26151.



## Redmayne & Graves look to china

Redmayne and Graves have introduced a range of bone china bathroom accessories to complement their English Country Garden collection of toiletry gifts.

The china coordinates with the floral designs on the English Country Garden toilet and

cosmetic bags, in shades of pink, amber, peach and green.

The range consists of a toothbrush holder (£3.50); soap dish (£3.95); cotton bud jar (£10.50); cotton wool jar (£12.50) and powder bowl (£12.95). *Redmayne & Graves Ltd.* Tel: 0768 63774.

## Givenchy add three for Summertime

Givenchy have introduced a range of colours and cosmetics in time for Summer.

The sun prism (£18) comes in shades of apricot and coral or cinnamon and gold spangled copper. It is said to enhance a lightly tanned skin or give a natural glow to pale skin.

The formula contains UVA and UVB filters as well as vitamin A and vitamin E.

The company has also come up with an eye shadow duo in bronze and terra (£12.50) and a golden bronze lipstick (£7.75). *Parfums Givenchy Ltd.* Tel: 0932 245111.

## ICI are advertising

ICI have launched a £1m advertising campaign to herald their breakthrough into the consumer market with a new range of household products.

The advertisements will appear in key women's Press

titles from June and use "Beatrix Potter-style" characters to illustrate ICI's new multi-purpose cleaner liquid soda crystals and Allfresh, the unfumed household deodoriser. *ICI plc.* Tel: 0625 582828.

## Bags are a gift from Addis

Addis have launched a range of "luxury" cosmetic bags and matching accessories said to combine elegance and high quality.

The range comprises three collections: Satin, made up of two sizes of cosmetic flap bag, a tissue cover and a dolly bag with a draw string (prices start at £6.99); Velvet, with two sizes of clasp purse, envelope bag and dolly bag (£4.99 to £11.99), and Lace, also with two sizes of clasp purse and a dolly bag (£5.99 to £9.99).

Packaging has been individually designed for each product making them "ideal gift purchases" say *Addis Ltd.* Tel: 0992 584221.

## Slazenger's sporty start

Two million packs of Start breakfast cereal feature tokens that can be redeemed for Slazenger Sport shower gel, talcum powder or shampoo, in a joint Kellogg's/Smithkline Beecham promotion starting now. Each item will "cost" four tokens.

Both brands are targeted at health conscious young men and women with an active lifestyle, and the companies believe that as the offer coincides with the beginning of the outdoor sporting season, it will encourage trial.

To ensure a high level of consumer awareness, the promotion will be supported by a £150,000 advertising campaign split between Press and posters, say *Smithkline Beecham Personal Care*. Tel: 081-560 5151.

**3M Health Care** say that the special offer period on introductory packs of Micropore Dress-it plasters has been extended from May 1 to the end of May. *Micropore Dress-it* hotline. Tel: 0509 613161.



# BEEF UP YOUR BABY FOODS.



Milupa is the brand leader in infant savouries with over 50% market share in chemists.\* We maintain our No. 1 position because we always keep abreast of consumer needs. That's why we're now responding to the growing demand for savoury foods by launching our first Infant Meat Dinners.

There are two beef and two chicken dinners available,

savoury Farmhouse Beef and tempting Braised Steak, delicate Country Chicken and satisfying Golden Chicken. And as you'd expect from Milupa, they're all delicious because they contain only top quality ingredients.

We're promoting the launch extensively in the consumer and paramedic press with new advertising based on our successful 'Little Experts' campaign. We're also distributing over a million free samples to generate trial. And to maximise your sales and profits we've produced eye-catching point-of-sale material.

So order your stocks of all 4 varieties now. After all, it's a perfect opportunity to put more meat on the bones of your babyfood sales.

\*Independent Research Data, 1989.



## **milupa**<sup>®</sup>

Milupa babyfoods. The one taste little experts agree on.

See your representative or ring our Sales Department on 081-573 9966. Milupa Ltd., Milupa House, Uxbridge Road, Hillingdon, Uxbridge, Middlesex UB10 ONE.



A woman with dark hair, wearing a light-colored beret and a white shirt, looking upwards and to the right with a slight smile. The background is a soft, out-of-focus grey.

**STOCK UP WITH EVER READY BATTERIES  
AND YOU COULD RECHARGE YOURS IN PARIS.**

How do you fancy four days in Paris with your partner, all expenses paid?

Don't just dream about it, make sure your customers buy Ever Ready Gold or Silver Seal and enter our 'Liaison in Paris' competition.

Because if they win, you do too.



It's easy. All you have to do is display the free posters and leaflets so they are aware of the promotion, and stamp the competition entry form so we know which chemist sold them their batteries.

Then just keep your fingers crossed that





one of your customers is the lucky winner.

Even if they're not, you can't lose. Because as usual with our exclusive deals, we're offering an impressive P.O.R. as well.

You don't even have to be a UniChem member to join in this one.



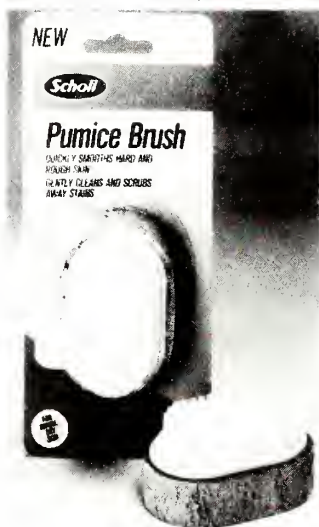
Since we're the sole distributors of Ever Ready to pharmacies in the UK, simply make sure your wholesaler is participating.

And if not just contact us direct. Because when it comes to incentives, nobody knows their onions better than us.



## Pumice brush joins Scholl toiletries

A natural pumice brush from Scholl has been developed to smooth hard, rough skin and remove stains on feet, knees and elbows. The brush has an "easy-to-grip" design with tough bristles (£1.99 each).



The whole "rough, dry skin" range is being supported with a £400,000 consumer advertising campaign in women's magazines over the next couple of months. Scholl (UK) Ltd. Tel: 071-253 2030.

**Solarcaine**, the aerosol pain relief product from Schering-Plough Consumer Health, is now available in a CFC-free formulation. Schering-Plough Consumer Health. Tel: 0638 716321.



## A glowing offer from Ultra Glow

Ultra Glow are launching a new sales drive aimed specifically at the independent chemist. The drive begins with an introductory range merchandiser and shelf talker, they say.

The merchandiser carries a selection of the complete Ultra Glow range in a compact format. It comes in burgundy, gold and black livery with six free brushes.

The newly launched Ultra Glow skincare range is being promoted in a specially designed shelf talker unit. It carries six of each product and is available at a discount of 5 per cent on normal trade prices. All products in the skincare range are allergy tested and do not contain animal ingredients say Ultra Glow Ltd. Tel: 071 607 9983.

## A gift for Dad from R&A

Richards & Appleby's Byron range of men's toiletries is being specially promoted for Father's Day. Gift packs feature a 100ml bottle of aftershave and a 100g soap on a rope for £3.99 or an aftershave plus bath and shower

talc (100g), also for £3.99. Aftershave on its own retails at £2.69, soap on a rope at £1.69.

Shelf edgers and stickers linking in to Father's Day are available from Richards & Appleby Ltd. Tel: 0695 20111.

## Press support and promotions for Wella

An £800,000 advertising campaign for Wella Balsam has started in the women's Press. The campaign, featuring the intensive conditioning products, runs until November and will feature in magazines like *Me*, *She*, *Elle*, *Woman*, *Marie Claire*, *Cosmopolitan* and *Company*.

Wella are also supporting the range with a series of instore consumer promotions. A free 30ml trial size intensive dry ends conditioner is banded to the extra light, extra rich and extra shine variants; the extra care variant comes with a free 30ml intensive perm replenisher.

The corresponding conditioners will be available with 20 per cent extra free, while the recently introduced perm revitaliser and hair restructurant will feature a promotional collar with a £0.30 off this or next purchase coupon, and the 150ml intensive dry ends conditioner and intensive perm replenisher have special price reductions from £1.65 to £1.45. Wella Great Britain. Tel: 0256 20202.

## All change

Vetchem, animal health product suppliers to pharmacies, have a new phone number: 0543 262882 or 255151 (fax 0543 253388).



## Day-long relief from hayfever and nasal-congestion

PHARMAX HEALTHCARE LTD  
BOURNE ROAD, BEXLEY, KENT, DA5 1NX



# WHEN IT COMES TO GIVING YOUR PHOTOSALES A MASSIVE BOOST THIS SUMMER—

The mix is Quicksnap – the revolutionary film and camera rolled into one – plus £1 million in marketing support.

Take an easy-to-use, point and shoot camera thats ready loaded with film, and universal appeal.

From tiny tots to teenagers, from young mums to favourite uncles.

Add £1 million in marketing support with a heavyweight London Weekend TV summer advertising campaign, point-of-sale material, national representation by TAMBRANDS – and the formula is right to boost your photosales sky high.

Don't miss out on the Fuji Quicksnap profit drive this summer. It all adds up to a great photo opportunity.

- The Fuji Quicksnap PLUS
- £1 Million Marketing Support
- LWT Ad Campaign
- Point-of-Sale Programme
- Tambrands Representation

## FUJI HAS THE RIGHT MIX!

SET THE STYLE FOR SUMMER

**Quicksnap** *The film and camera rolled into one!*

Fuji Photo Film (U.K.) Limited, Fuji Film House, 125 Finchley Road, London, NW3 6JH. Tel: 071 586 5900.





## Ecofem offers re-usable protection

Ecofem is a washable sanitary towel designed to reduce pollution and to avoid the possible health hazards of dioxins in paper products.

Made by Personal Hygiene Supplies, a division of Ganmill Ltd, Ecofem is anatomically-shaped, leakproof and can be re-used after washing. It is available initially only on mail order (three, £2.95 plus £0.50 postage) but may eventually be sold through pharmacies.

The product has been designed in close consultation with the Women's Environmental Network. Ganmill marketing manager Ruth Lederman believes Ecofem will provide an answer to health and environmental concerns about sanpro. "Throughout our discussions the message came out loud and clear that, although there was an obvious reluctance to return to the days of washing out pieces of rag, there was a definite need to rethink," she says. *Ganmill Ltd. Tel: 0278 423037.*

## Clinique tackle oil



Clinique have come up with an oil-free moisture formula which is said to provide oily skin with the benefits of a moisturiser without any extra oil.

It is described as "the answer" for oily skin or any skin that cannot tolerate oil on the major facial areas.

The product (40ml £12.50 75ml £17.50) is said to be also suitable for combination skins. It is described as lightweight, water-based and totally non-clogging. It also helps to minimise shine smooths coarse patches and helps skin stay fresher longer, say Clinique.

As with all Clinique products, the moisturiser is allergy tested and 100 per cent fragrance free. *Clinique Laboratories Ltd. Tel: 071-499 9305.*

## Crushing help from Ibis

Help is at hand for the one in seven of the population who find tablet swallowing difficult.

The Ibis tablet powdering system has, say its American manufacturers, a huge number of potential users of all ages; pets too. Tablets are placed in the clear plastic base, the blue screw top section tightened with modest pressure and the medication powdered by torque action, with deep grooves on both sections making manipulation easier. The system is made from FDA-approved materials and is guaranteed unbreakable.

The Ibis system will retail for between £2 and £3 and comes in point of purchase display boxes or peg cards printed in full colour with how-to-use illustrations.

The company also produces a patented Pill Splitter to divide larger or small tablets.

Ibis president Jack Jacobs told C&D he is currently investigating UK distributors for his products but, for the moment, the company is shipping direct from the US. *Ibis Medical Products Inc, PO Box 80287, Phoenix, Arizona 85060.*

## Braun go all Curly

Braun's new Curly Style LS33 has been launched as an addition to its mainstream core range.

The LS33 (£6.95) is described as an easy to use styler which creates curls and ringlets. It

features a hanging loop and a 2.2m swivel cord for easy use. The Styler heats up quickly and an indicator dot shows when it is ready. *Braun (UK) Ltd. Tel: 0932 785611.*

# TENSE ABOUT TURNOVER?



## TAKE KALMS

More and more people are turning to Kalms as the natural way to ease the stresses and strains modern life sometimes brings.

No wonder it's the fastest selling alternative to benzodiazepines.

And by popular demand it's now also available in a 200 pack.

### Kalms

Relieves periods of worry  
irritability, stresses & strains.  
Promotes natural sleep.

200 Tablets



A non habit forming  
natural plant remedy

This year's advertising spend will be the biggest ever.

So expect bigger sales, bigger turnover and, with Kalm's high margins, bigger profits.

And relax. But only if you've got enough stock to meet the demand.

Made by **Lanes** - Leaders in natural health care



# ON YOUR MARKS, GET SET,



MYCOTA WILL BE SUPPORTED BY £¼ MILLION THIS YEAR. AND FOR STARTERS WE ARE RUNNING AN EYE CATCHING, NATIONAL POSTER CAMPAIGN. SO, BE QUICK ON YOUR FEET AND STOCK UP WITH THE BRAND THAT WORKS FAST ON THEIRS.





## Book on Household Hints

Nicholas Laboratories will be supporting their Dabitoft instant stain remover with an on-pack promotion offering a book of household hints.

Entitled "The Complete Household Hints", the 200 page book, which normally retails at £2.99, contains hundreds of tips to save time and money in the home.

It will be available to consumers in return for 30p postage and two proofs of purchase — one from Dabitoft's 75ml liquid instant stain Remove a second from any other Dabitoft product.

Special promotional packs will be available from the end of this month until the end of September. Nicholas Laboratories Ltd. Tel: 0753 23971.

L'Oreal are advertising their Recital range on television this week with a £0.25m spend. The campaign will last for four weeks and will run in Central, STV, Anglia and TSW regions. L'Oreal. Tel: 071-937 5454.



Pure & Simple gets together with Kellogg's Special K this month on six million packs of the breakfast cereal. These will feature tokens that can be redeemed for Pure & Simple gentle skin toner, deep cleansing lotion or daily moisturising lotion. Each item will require eight tokens. A £250,000 advertising spend by Kellogg's in women's magazines will support this promotion, and Smithkline Beecham will continue to advertise Pure & Simple with a £2.5m spend in "quality" women's Press. The company suggests that pharmacists stock enough of the range to meet additional demand this Summer. Smithkline Beecham Personal Care. Tel: 081-560 5151.

## May madness

Unichem are offering members special reductions in a May offer.

Discounts will be available on Scholl odour attackers, Andrews, Durex, Sanatogen, Lynx, Kleenex and Aller-Eze products. Unichem. Tel: 081 391 2323.

## New look Braun is Independent

Braun are relaunching the restyled version of their Independent 2000 range of stylers.

The relaunch will be supported from May to September with a £350,000 advertising campaign in major women's Press.



The new-look Independent will have white and grey livery with the control buttons picked out in bright colours.

This, say Braun, reflects their policy of marketing all personal care products as beauty products — and not merely appliances. This, they say, will increase their consumer appeal.

The technical specification and the price of the new Braun Independent 2000 remains the same but the reduced size of the barrel holes will stop them becoming clogged, say Braun (UK) Ltd. Tel: 0932 785611.

## Consumer to win £5,000 in Scholl insole offer

One consumer will win £5,000 and 50 runners up £50 each in Scholl footcare promotions now entering stockists.

Promotional packs of Hilder Comfort heel liners, heel grips, half insoles, hosettes and high heel insoles will carry scratch cards and the message "Walk off with a comfortable £5,000". Consumers are guided to the answers to the scratch competition and then have to complete a small puzzle. Scholl (UK) Ltd. Tel: 071-253 2030.

## Listerine in a Clifford attack

Listerine, is being promoted from June, with a collection of "Clifford's Plaque Attacker" items.

Consumers can collect points from the 200ml, 400ml and 600ml sizes of Listerine and apply for a selection of Clifford novelties including bath robes, bath and hand towels and T-shirts. Warner-Lambert Healthcare. Tel: 0703 620500.

## Tropical TV campaign

Warner Lambert are running a series of advertisements this year featuring the Hawaiian Tropic tanning researchers.

The advertisements will run in the women's consumer Press and on the London Underground from May and will include two new executions. The total spend for 1990 is £0.75m. Warner Lambert Healthcare. Tel: 0703 620500.

Mates Healthcare are running a flash pack promotion on all packs of 12 condoms in the range, offering 15 condoms for the price of 12.

All 12-packs of ultra safe, natural, ribbed, playmates and mint fragranced will include an extra three condoms during the promotion period. Mates Healthcare Ltd. Tel: 081-541 0133.

## QuikRead

## CHOLESTEROL Testing System

— ACCURATE — RESULTS IN MINUTES  
— EASY TO USE — USES WHOLE BLOOD

COMPLETE TESTING PACKAGE

**£995** + VAT  
3 YEAR LEASE

**£7.95** + VAT  
PER WEEK

FOR IMMEDIATE DEMONSTRATION

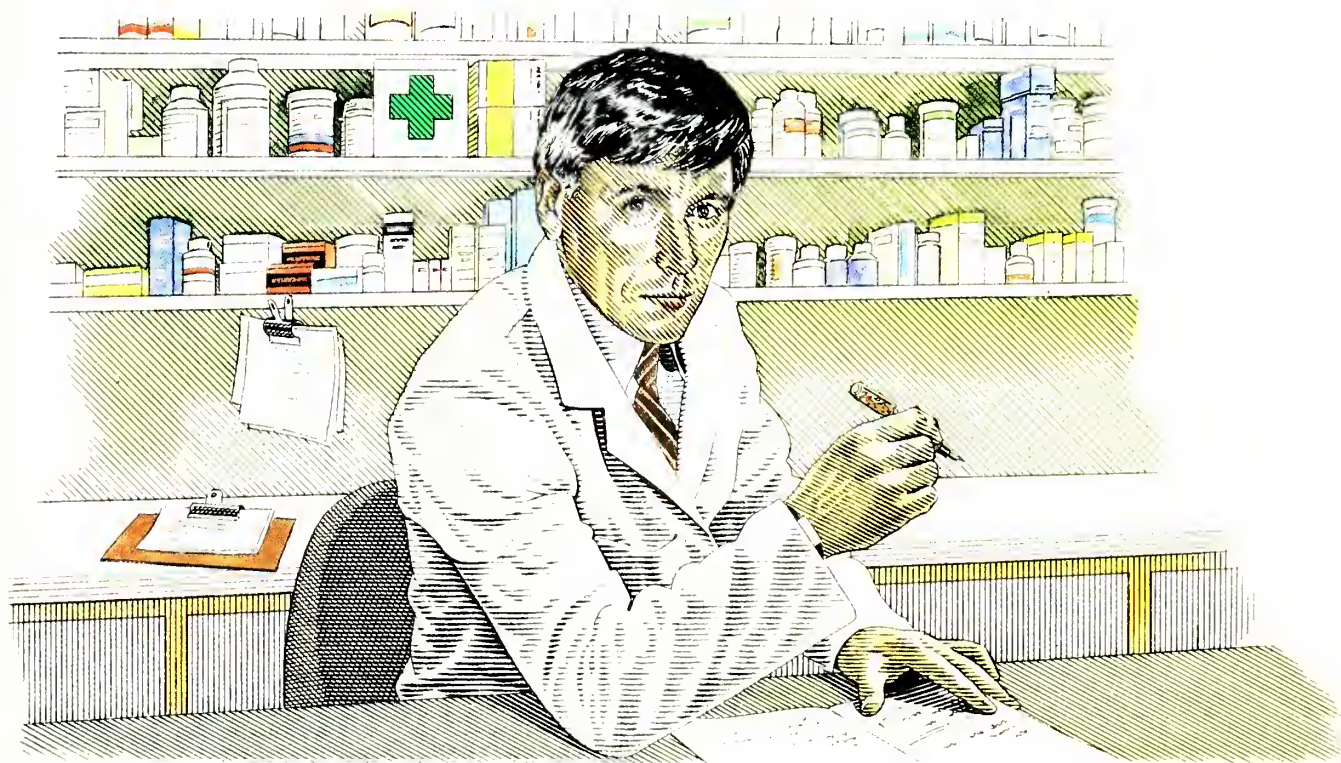
**TEL: 061 766 2313**

ANGLO EUROPEAN HEALTH

136A BURY NEW ROAD, WHITEFIELD,  
MANCHESTER M25 6AD.



# Professionally recommended for the fast relief of hay fever



- The majority of patients obtain relief within an hour
- Avoids drowsiness and effects on performance
- Patients can choose between twice-daily Triludan or the one-a-day dosage of Triludan Forte

**TRILUDAN®**  
terfenadine



ONE-A-DAY

**TRILUDAN®**  
**F O R T E**  
terfenadine 120mg

## The market-leading pharmacy antihistamine offers efficacy, speed of action and a good safety record.

### TRILUDAN/TRILUDAN FORTE

#### ABRIDGED PRESCRIBING INFORMATION

**Presentations:** Triludan Tablets. White, round, flat faced, bevel edged tablets with 'M' in 2 concentric circles on one side and a scored bisect line and '084' on the other. Each tablet contains 60mg terfenadine. Triludan Forte Tablets. White, convex, capsule-shaped tablets with 'T' on one side. Each tablet contains 120mg terfenadine. **Uses:** Terfenadine is an antihistamine indicated for the symptomatic relief of hay fever, allergic rhinitis and allergic skin conditions. **Dosage and Administration:** Adults and Children over 12 years: 60mg twice daily or 120mg once daily in the morning. Children 6-12 years: 30mg twice daily. **Contra-indications, warnings etc.:** **Contra-indications:** Known hypersensitivity to the drug. **Precautions:** Consider risk/benefit ratio in pregnancy and lactation. **Side-effects:** Headache, dizziness, abdominal pain and gastro-

intestinal upset and skin rashes have been reported. Reports of drowsiness are rare. This means that allergy sufferers usually may drive or perform tasks requiring concentration. However, in order to identify sensitive people who have unusual reaction to drugs, it is advisable to check the individual response before driving or performing complicated tasks. **Overdosage:** Several cases have been reported and generally signs and symptoms were absent or mild. However a severe ventricular arrhythmia has been reported and therefore cardiac monitoring for at least 24 hours is recommended with standard measures to remove any unabsorbed drug. **Pharmaceutical Precautions:** None. **Legal Category:** P. **Package Quantities:** Triludan Tablets. Packs of 10 tablets. Triludan Forte Tablets. Packs of 7 tablets. **Further Information:** In actual driving tests, terfenadine does not impair performance, nor is there a change in mood. **Product**

**Licence Numbers:** Triludan Tablets: 4425/0024, Triludan Forte Tablets: 4425/0091. **Retail Price:** Triludan Tablets: pack of 10 £2.39, Triludan Forte Tablets: pack of 7 £3.29. **Date of last review:** January 1990. Further information including full Product Data Sheet is available from: Medical Information Department, Merrell Dow Pharmaceuticals Ltd., Lakeside House, Stockley Park, Uxbridge, Middlesex UB11 1BE. Trademarks: Triludan, Merrell, Dow.

**Merrell  
Medicines**  
Confidence in pharmacy

TR1/2/90/7



# ROBINSON BABY WIPES

## NO ALCOHOL, NO LANOLIN, NO WORRIES

Even with a big interest in the fast growing Baby Wipes market, at Robinson we aren't content to rest on our laurels. Firstly we've reformulated our Baby Wipes, giving them a new 'soft' fragrance, removing all lanolin and alcohol but keeping the price competitive –



thus making them even more popular with caring Mums. And to match the product changes, we've come up with some bright, new packaging graphics which research has proved to have excellent all round Mum appeal. Why go to such lengths? It's simply because wipes are one of the fastest growing consumer markets in the UK, worth over £28m in 1989. By making a good product better, we'll make ourselves and yourselves, more profitable than ever. For ordering details please contact your usual wholesaler or Robinson Healthcare, Hipper House, Chesterfield S40 1YF.

# ROBINSON







## Calcia goes on trial in blister packs

English Grains Healthcare have launched a blister-packed trial size of Calcia.

The pack, containing 12 tablets, will retail for £0.49 and includes a ten page leaflet outlining the functional role of calcium replacement and the dangers of its deficiency, says the company.

The product's shelf appeal will be enhanced by a counter display unit, which carries 15 trial packs and will fit alongside a cash till to encourage impulse purchases, says the company. Stocks are available from mid-June. *English Grains Healthcare. Tel: 0283 221616.*

## Durex team up with Suzuki for 1990 season

Durex are to continue their association with the Suzuki motor cycle racing team for the 1990 season. The Durex Suzukis will be contesting the 750cc Superbike and 600cc Supersport British championships, and the 750cc Superbike world championship.

The team's senior rider will be Roger Burnett, 29, who was British champion in 1986 and is a former winner of the Senior TT. Roger will ride in the 750cc

championships for the team.

Durex Suzuki will be using Suzuki GSXR 750R machines; all team bikes will carry the Durex logo.

David White, Durex's marketing manager commented: "It is a really effective method of communicating the safer sex message in a fun and appealing way, particularly to younger people." *LRC Products. 071-527 2377.*

## Pizza promotion from Kodak

Kodak have released details of this Summer's Kodacolor Gold television commercial and are also launching a pizza promotion for the film.

The television advertisement features a toad, a soldier, a New York taxi and a mongrel dog called Rover, to highlight the film's ability to faithfully record green, red, yellow and dog-brown colours.

The advertisement will be screened several hundred times at peak viewing times during the Summer months. The advertisement also breaks down into four separate 40-second

vignettes which will be screened as alternatives once the full advertisement has become known.

There will also be a nationwide poster campaign.

The pizza promotion begins on May 14 and lasts until the end of October. Customers will be offered a free pizza worth up to £4.50 at Pizza Hut restaurants when they buy a special twinpack of Kodacolor Gold film. The promotion will be supported by point of sale material including merchandisers, dumpbins, window displays and stickers. *Kodak Ltd. Tel: 0442 61122.*

# WE HAVE YOU COVERED

■ Are you satisfied with your present supplier, does he guarantee that the Parallel Imports are of European origin and fully licensed and labelled with in-house quality control?

■ Does he guarantee Product Liability Insurance?

■ Can he supply all your requirements, are his prices competitive? — not just a selected range!

■ Can he offer a 24 hour delivery service of Parallel Imports, Generics, OTC lines, UK products, Films, etc. etc.?

*We can arrange for one of our Telesales staff to phone you at your convenience or one of our representatives will call upon you if you prefer. They cover the UK!!!*



Contact us at either of our depots

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LONDON: 081-443 1919

## Let's get started !!!

# SPECTRUM

MARKETING

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ENFIELD, MIDDLESEX EN3 7SR  
Tel. No: 081-443 1919 Facsimile 081-443 3230

225 BURY NEW ROAD, WHITEFIELD,  
MANCHESTER M25 6GQ  
Tel. No: 061-766 8299 Facsimile 061-766 8307



## A new look for Jordan

Jordan have relaunched their interdental range with modern packaging and a range of bright colours.

Starting from June, the dental floss, dental tape and dental sticks will all be available in the new ribbed packaging.

In response to consumer demand, the dental floss has also been made stronger and both the floss and the tape feature instructions for use on the pack. *Distributors Alberto-Culver Co. Tel: 0256 57222.*

## Baby wipes are updated

Robinson Healthcare have relaunched their baby wipes, giving them a new "soft" fragrance and making them both lanolin and alcohol-free. The wipes are presented in new packaging — a tub of 80 (£1.69), shrink-wrapped in sixes. A trade promotion runs until the end of May in conjunction with Fresh-ups, Robinson representatives are offering one free for every 12 on minimum orders of four outers. *Robinson Healthcare. Tel: 0246 220022.*

## Complan gets more support

Crookes Healthcare are investing in a £1.5m marketing campaign for their Complan brand.

The main thrust of the campaign will be a new television commercial now being aired nationally for ten weeks, says the company. In addition, Complan will be offered in a product sampling campaign via the national consumer media. *Crookes Healthcare Ltd. Tel: 0602 507431.*

## Celebration

A&F Pears this year celebrate their bicentenary of producing Pears soap. It was first produced by Cornish hairdresser Andrew Pears in 1789. To commemorate this, Pears have produced a 28 page, full colour consumer booklet which is to form a part of the PR support given to the bicentenary year. *A&F Pears Ltd. Tel: 071-486 1200.*



## Scholl relaunch range

Scholl are relaunching their athlete's foot range with a new cream and a repackage. New athlete's foot cream (15g £1.29) contains tolnaftate and replaces the gel formulation and complements the existing range of sprays, powders and solutions.

The new packaging features blue and yellow corporate colours against a light blue background. A

new foot graphic emphasises, say Scholl, key product benefits — relieves itching and soreness, destroys athlete's foot fungi, and prevents reinfection.

As an extra feature for the Summer, while stocks last promotional packs of athlete's foot spray will offer 25ml extra fill. *Scholl (UK) Ltd. Tel: 071-253 2030.*

## Agfa offer footballs

Agfa are running a promotion on the theme of this year's World Cup. Pharmacists ordering 30 twin packs of GX E-240 video tape will be given a full sized leather football, a giant-sized beach towel with World Cup livery and a white sports bag. The special splittable

twin packs of video tape are flagged with a World cup sticker and are supported by a range of point-of-sale and promotional items, including dump bin headers. They will be available at special offer prices. *Agfa Gevaert Ltd. Tel: 01-560 2131.*

### ON TV NEXT WEEK

GTV Grampian  
B Border  
C Central  
CTV Channel Islands  
LWT London Weekend  
C4 Channel 4

U Ulster  
G Granada  
A Anglia  
TSW South West  
TTV Thames Television  
TV-am Breakfast  
Television

SK Sky  
STV Scotland (central)  
Y Yorkshire  
HTV Wales & West  
TVS South  
TT Tyne Tees

<b>Anadin Extra:</b>	All areas except TSW & LWT
<b>Bisodol Regular:</b>	GTV, U, G, HTV, TVS, TT7 & C4
<b>Bodyplan:</b>	All areas except HTV, CTV, LWT, C4 & TV-am
<b>Dimension:</b>	All areas except TV-am
<b>Efamol evening primrose oil:</b>	TVS
<b>Gillette Sensor:</b>	All areas
<b>Hermesetas Light:</b>	G & Y
<b>Listerine:</b>	GTV, U, STV, BTv
<b>Macleans Active Mouthguard:</b>	All areas
<b>Mum deodorant:</b>	All areas
<b>Oxy:</b>	U, STV, G, Y, C, HTV, LWT, TT
<b>Pseudouce Ultra T:</b>	TV-am
<b>Plax:</b>	All areas except LWT & TV-am
<b>Ponds creams:</b>	All areas except U & TV-am
<b>Recital:</b>	STV, C, A, HTV, TSW

## Varta charge ahead

Three rechargeable battery chargers have been launched by Varta Batteries.

Two 5006 (HP 7 size) chargers can fast (£17.25) or super-fast (£19.95) charge two or four cells at any one time in six to seven or two hours respectively, says the company. They can be plugged directly into any standard wall socket, and the super-fast charger comes with an automatic timer which cuts off the charge to prevent battery damage.

The multi-charger (£14.99) is capable of charging 5006, 5014, 5020 and 5022 sized batteries. It comes in a white impact resistant plastic with a slide-on battery compartment cover.

All chargers come in free standing blisters that can also be hung on pegs, say *Varta Batteries Ltd. Tel: 0784 64341.*

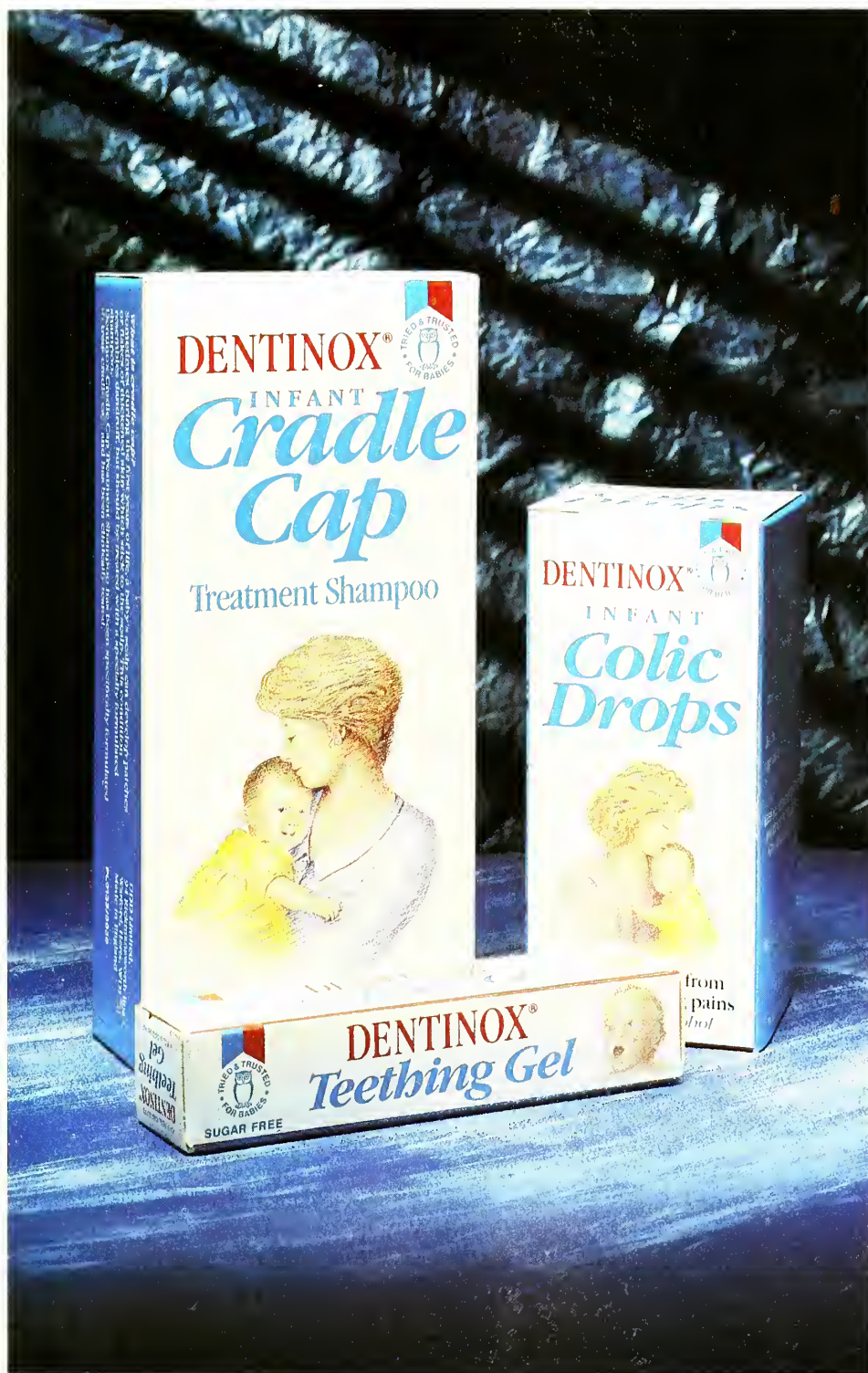


**Modern Health Products** say that the renewal of the licences for their range of herbal remedies has resulted in several changes to their statements of active ingredients. These are: Athera — parsley 60mg, vervain 10mg, senna leaf 4mg, aqueous extracts from vervain 90mg, clivers 60mg and senna 10mg; Gardolex — marshmallow root 125mg, parsley 25mg, and micro encapsulated garlic oil 22mg; Sunerven — motherwort 45mg, aqueous extracts from vervain 90mg, valerian 90mg, and passiflora 45mg; Vegetax — celery 87mg, buckbean 37.5mg, and black cohosh 37.5mg. *Modern Health Products Ltd. Tel: 081-397 4361.*

Elastoplast Airstrip detectable dressings: Cartons of 100 7.5cm by 2.2cm retail at £10.07, not as stated in C&D Price List May 1990.



THEY'LL  
BE  
CRYING  
OUT  
FOR IT.



When a baby cries out in pain from teething, colic or wind, it can be very distressing for a concerned parent.

That's why we'll be spending over £100,000 in advertising and promotion to tell new mums how Dentinox can help.

So for crying out loud make sure you're well stocked with Dentinox. It would be a crying shame to miss out.

#### DENTINOX GEL

- ★ Can be used from birth
- ★ Safe local anaesthetic
- ★ Works in 20 seconds
- ★ Dosage can be repeated after 20 mins
- ★ Lasts for 2 hours
- ★ Sugar free, ASPIRIN-FREE

#### DENTINOX COLIC DROPS

- ★ Relieves wind and griping pains
- ★ Contains no systemic drugs
- ★ Can be used from birth
- ★ Simple to use
- ★ Breaks down and gently releases ingested air
- ★ Contains no alcohol, so will not mask other symptoms

#### DENTINOX CRADLE CAP TREATMENT SHAMPOO

- ★ Gently releases the dry flakes of skin leaving the scalp clean and healthy
- ★ Can be used as a regular shampoo
- ★ No fuss, no complicated usage instructions

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# SCRIPT SPECIALS

## Drug Tariff June changes

From June 1, a Debrisan absorbent pad dressing will be added to Part IXA of the Drug Tariff. The pad will be available as a 3g single sachet at a basic price of £2.36. The following will be added to Part VIII as category C items based on a named proprietary from the same date:

Drug	Pack	Price (p)	Based on
Astemizole tablets 10mg	30	570	Hismanal
Bisoprolol fumarate tablets 5mg	28	798	Monacor
Bisoprolol fumarate tablets 10mg	28	896	Monacor
Cephalexin oral suspension 125mg/5mg (syn: cephalexin mixture)	100ml	159	Ceporex
Cephalexin oral suspension 250mg/5ml (syn: cephalexin mixture)	100ml	319	Ceporex
Cinnarizine tablets 15mg	100	500	Stugeron
Clemastine fumarate tablets 1mg	50	210	Tavegil
Clemastine hydrogen fumarate elixir 300mcg/5ml	150ml	98	Tavegil
Clomiphene tablets BP 50mg	100	3364	Clomid
Flucloxacillin oral suspension 125mg/5ml	100ml	332	Floxapen
Flucloxacillin oral suspension 250mg/5ml	100ml	664	Floxapen
Gentamicin ear drops 0.3%	10ml	183	Genticin
Gentamicin eye drops BP 0.3%	10ml	183	Genticin
Lisinopril dihydrate tablets 10mg	28	1213	Zestril
Medroxyprogesterone acetate tablets 100mg	100	4162	Provera
Metipranolol eye drops 0.1%	5ml	403	Glauine
Salbutamol injection 50mcg/ml (5ml)	10	570	Ventolin
Salbutamol respirator solution 5mg/ml	1	271	Ventolin
Tamoxifen tablets 40mg	30	2200	Nolvadex Forte

(syn: tamoxifen citrate tablets)

PSNC comments that these preparations are available either as one proprietary only (disregarding OTC presentations) or two proprietaries where there is no difference in price.

## Ponderax isomer for obesity

Servier Laboratories are launching a new treatment for obesity based on an isomer of fenfluramine (Ponderax).

Adifax contains dexfenfluramine hydrochloride, the dextro isomer (S-form) of the racemate d-l fenfluramine. It is a much more potent agonist of serotonin than the laevo-isomer and has considerably fewer side effects than the racemate.

Adifax is extensively metabolised in the liver to the active compound dextrofenfluramine which acts centrally in the hypothalamus to affect dietary intake and the balance of macronutrients.

It produces an effect similar to a carbohydrate rich meal thus reducing the desire for carbohydrates and subsequent eating behaviours.

Adifax will initially be promoted to selected hospital specialists with a launch to GPs planned later in the Autumn.

**Distributor** Servier Laboratories Ltd, Fulmer Hall, Windmill Rd, Fulmer, Slough

**Description** No. 3 size opaque white capsules marked "S5614" each containing 15mg dexfenfluramine hydrochloride

**Uses** An adjunct to continued dietary treatment of severe obesity in patients who have not responded to an appropriate

weight reducing diet alone. Patients should be given close support and supervision

**Dosage** Two capsules daily, one in the morning and one in the evening, at meal time

**Side effects** Are similar to fenfluramine (Ponderax) except that schizophrenic-like reactions have not been seen (see Data Sheet)

**Contraindications, warnings, etc** Do not use in obese patients with glaucoma or in those with a history of anorexia nervosa, psychiatric illness, depressive illness or a known history of drug or alcohol abuse. Avoid in renal or hepatic impairment.

Dexfenfluramine has a specific serotonergic action and should not be used concomitantly with monoamine oxidase inhibitors (MAOIs) and there should be at least a two week interval after stopping MAOIs and starting Adifax. As with fenfluramine, depression has occurred after abrupt cessation of treatment so the dose should be reduced gradually (see Data Sheet)

**Supply restrictions** POM  
**Packs** Carton of 60 capsules (£8.29 trade) containing two push-through blister strips of 30 capsules

**Product licence** (Held by Les Laboratoires Servier, France) 5815/0003

**Issued** May 1990

## Faverin doubles up

Duphar have introduced a 100mg tablet presentation of Faverin. Each oval, yellow enteric-coated tablet contains 100mg fluvoxamine maleate and is imprinted "Duphar 313".

Faverin is indicated for the treatment of depressive illness. For dose, side-effects and contra-indications, see Data Sheet. The tablets come in blister packs of 30 (£25 trade). The licence number of this POM is 0512/0072. Duphar Laboratories Ltd. Tel: 0703 476171.

### BRIEFS

**Abbott's** Paediasure, a complete liquid feed suitable for children, is now prescribable on FP10 as a borderline substance. Abbott Laboratories Ltd. Tel: 0795 58099.

**Becton Dickinson** have introduced a 0.3ml U-100 insulin syringe (10 £0.90 trade) and a pen needle (100 £7.35, both prices trade). Becton Dickinson UK Ltd. Tel: 0865 777722.

**CP Pharmaceuticals** have discontinued their liquid-filled temazepam capsules. Once stocks are exhausted, orders will be supplied with gel-filled (Gelthix) capsules: 10mg 1,000 pack £24.15 (offer price £21.50); 20mg 500 pack £21.06 (offer price £19.50, all prices trade). CP Pharmaceuticals Ltd. Tel: 097 661261.

**Merck** say that the shelf life of Nutrizym GR has been extended from 18 to 36 months. E. Merck Ltd. Tel: 0420 64011.

**Smith & Nephew** have introduced a new Scherisorb 15g Drug Tariff sachet pack. Outers of ten cost £14 (trade), and each sachet retails at £2.27 (Script specials, April 28, p708). Smith & Nephew Medical Ltd. Tel: 0482 25181.

**Price reductions:** From June 1, Leukopor 1.25cm by 5m £0.39 per roll, 2.5cm by 5m £0.61, 5cm by 5m £1.07, Leukosilk 1.25cm by 5m £0.55, 2.5cm by 5m £0.80 and 5cm by 5m £1.40. Beiersdorf UK Ltd. Tel: 0908 211444.



Sir Geoffrey Chandler, second left, industry advisor to the Royal Society Awards, presents a certificate and cheque for £2,000 to Dr Alison Keys, technical director of Britcarr Ltd, winners of the Southern regional final of the Management of New Ideas Award for the company's range of seaweed-based dressings. Britcarr managing director David Wren (left) and marketing director Bob Browning look on





## Ready-to-Feed babymilks. Perfect for the inexperienced mother.

There are times when a mother is unable to bottle feed her baby and has to rely on someone who's not quite such an expert.

For these occasions Cow & Gate Ready-to-Feed baby-milk is perfect.

Available in Premium and Plus, it comes already prepared in the bottle. Just add a sterilised teat and locking ring\* and it's ready to use.

So when it's dad's turn to bottle feed the baby, mum knows she can leave it to him and not have to worry.

And Ready-to-Feed can make life easier for mum too.

If she's out shopping, or away on holiday, it's the ideal solution.

There are two sizes: 100ml and 200ml, making it suitable for feeding from birth to weaning and beyond.

So when mums (or dads) come and ask you what's the simple answer to bottle feeding, recommend Cow & Gate Ready-to-Feed.

For more information

contact: Cow & Gate  
Ltd, Trowbridge,

Wilt's BA14 8YX.

**Cow & Gate**  
The Babyfeeding Specialists.



\*STERILISED TEAT AND LOCKING RING NOT SUPPLIED Breastmilk is the best food for babies. The purpose of infant milk formula is to replace or supplement breastmilk when a mother cannot, or chooses not to breastfeed. The cost of infant milk formula should be considered, and medical advice taken, before deciding how to feed a baby.



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cream

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laxative

'Bisodol'  
antacid

'Bismag'  
antacid

'Bisodol'  
Extra

'Preparation H'  
Ointment and  
Suppositories

'Compound W'  
liquid wart remover

'Albee with C'  
dietary supplements

'BC 500'  
dietary supplements

'Sergeants'  
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Pet Patrol

'Freezone'  
Liquid Corn Remover

'Sergeants'  
Rug Relief and  
Rug Patrol





# We've got your customers covered.

Whitehall Laboratories have always had a wide selection of products for you and your customers. And now that range is even wider since we are handling the over-the-counter brands of A H Robins Ltd and certain Wyeth OTC brands.

In fact, we can now look after your customers from head to toe.

And we'll be looking after you, the pharmacist, just as well. More and more of you will be getting visits from our representatives, keeping you up-to-date with the news behind these heavily promoted brands – as well as supplying you with merchandising support.

Orders can be taken from you direct by your local representative. Or our new national indirect sales team can transfer your order through your usual wholesaler.

So whether it's a headache or a haemorrhoid, a dry cough or dry lips – we've got your customers covered.

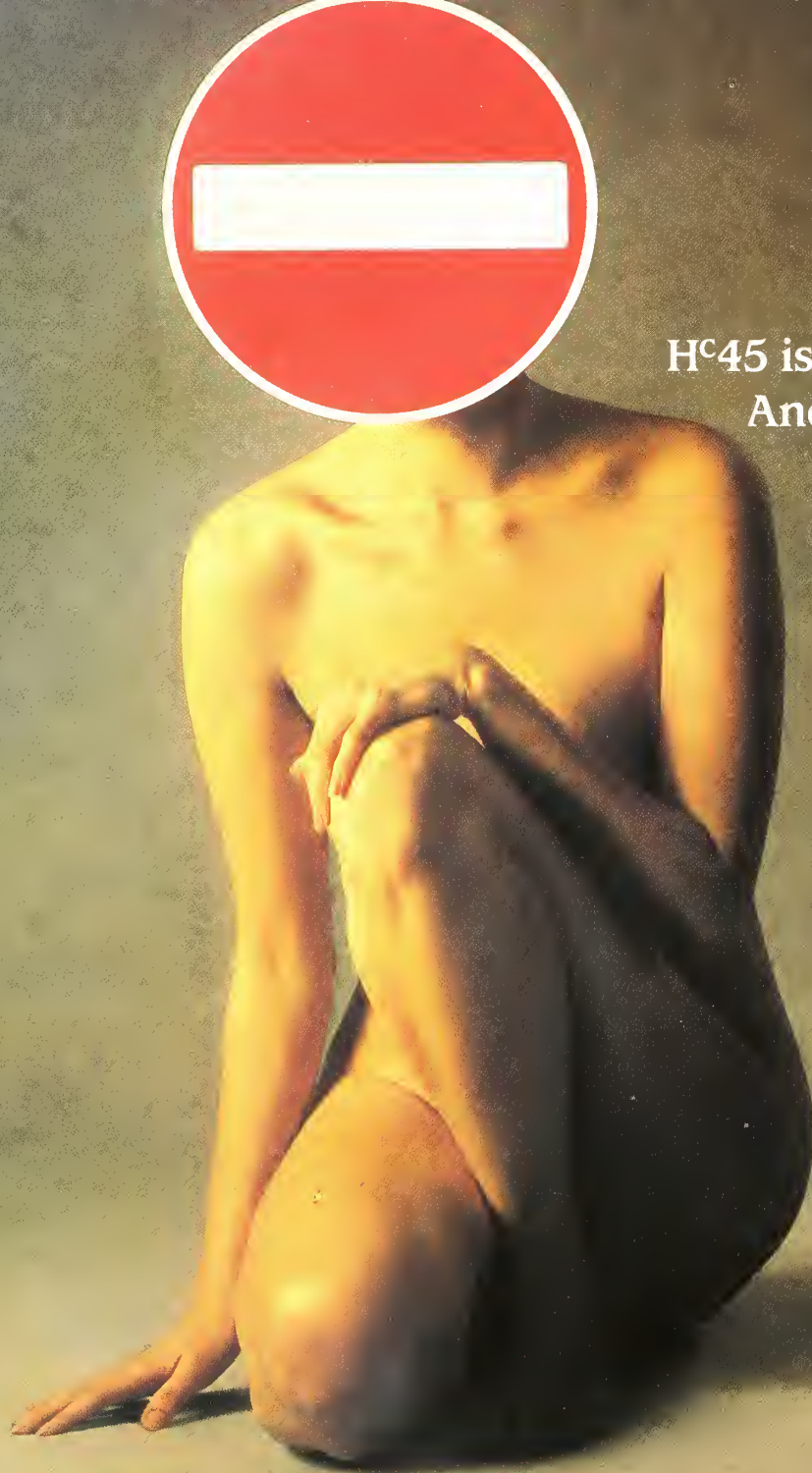


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The results are extremely positive. You're giving your customers good advice, and they follow it. Studies have shown that the vast majority of your customers use hydrocortisone only on their hands, wrists, arms, legs and body. And, even more important, they are using it for seven days or less.<sup>1</sup>

Of all purchasers, 85% bought hydrocortisone following a medical professional's advice. And an overwhelming majority of these professionals were your colleagues. Pharmacists also advised their customers on how to use hydrocortisone properly, and two thirds of the customers remember the advice.

These studies have proved conclusively that H<sup>c</sup>45 (recommended twice as often as any other brand) is as safe as it is effective.

And they have also proved that, thanks to you and your colleagues, people use it wisely.



As gentle as it's effective.



# Q&A ANSWERS

When she presents this prescription, an 18 year-old woman, with no history of chronic disease, says that she doesn't like using a cream and pessaries. Is there nothing better?

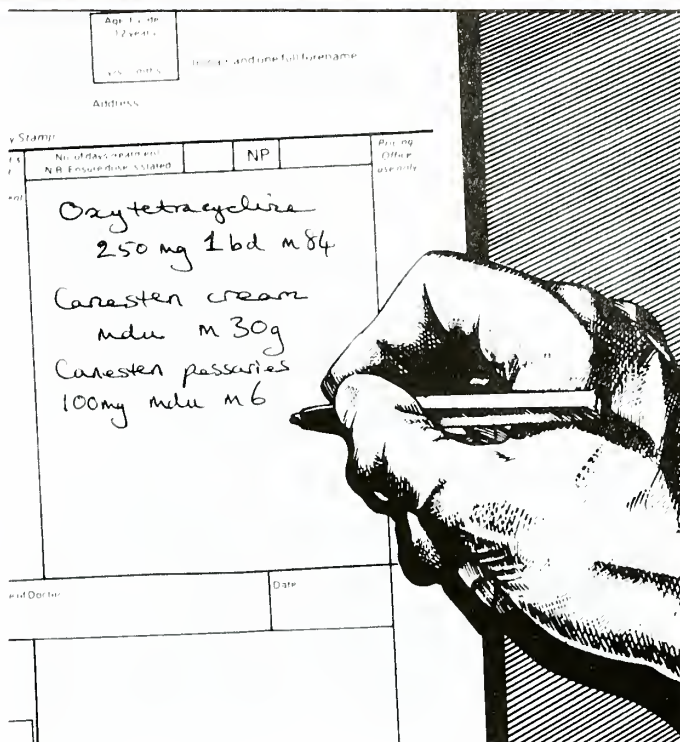
## QUESTIONS

- 1 A simple "no" is correct but why is it insufficient?
- 2 What role could her drug therapy play in vaginal candidiasis?
- 3 What action do you suggest?
- 4 Can you make any other suggestions?

1 There are now two orally active antifungal agents — fluconazole and itraconazole — which are effective against vaginal candidiasis after only one or two doses. They are not clearly more effective than several days' treatment with a combination of cream and pessaries. However, there is evidence that women prefer oral to local therapy. This lady seems to have tried local therapy before. She may have recurrent candidiasis and her distaste may affect compliance and impair the efficacy of treatment.

2 Prolonged tetracycline therapy, as is customary to treat acne, may occasionally provoke candidiasis by disturbing vaginal flora. Other predisposing drugs which should be excluded are recent treatment with a broad spectrum antibiotic (to treat a urinary tract infection, for example) or oral contraceptives.

3 You should discuss with the GP the possibility of oral antifungal therapy. There have been isolated and as yet unconfirmed reports of failure of oral contraceptives in women taking fluconazole but the manufacturer cites evidence that no significant interaction occurs. If this is the latest of several



episodes of candidiasis even though compliance has previously been adequate, a temporal link with the oral contraceptive or the tetracycline may emerge.

Topical treatment for acne — for example, clindamycin lotion or debriding agents — should be considered although it is less

convenient; alternatively, erythromycin may be better tolerated. If the symptoms persist, the use of oral contraception should be reviewed.

4 You should also suggest that her partner is treated as candidiasis may be asymptomatic in men.

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# Vosene — the shampoo you can trust



In this day and age, who has time to wonder if their hair will look good after shampooing? So many new shampoos burst onto the market swathed in media hype only to fade and die after a very short period of time. Today's busy mum needs to know that her family's hair will be clean and healthy-looking after every wash. This is a promise she knows Vosene can keep.

Vosene shampoo, the family favourite, starts 1990 maintaining its position as the third leading brand in the UK market. The no-nonsense traditional shampoo product has always put value for money first and this is recognised by the housewife who wants the best for her family's hair. Vosene shampoo is "the family shampoo you can trust", doing the job of keeping hair squeaky clean and perfectly healthy; benefits which your customers have always relied on.

With value for money in mind, Vosene are again offering extra added value on-pack this year. From late April to June, Vosene will be running added value on both Vosene Original and Vosene Herbal packs. And that is not all. The promotion will be followed by a national television advertising campaign to be aired during the Summer

## Attractive campaign

With all the attention that Vosene's campaign will attract, pharmacists should be sure to stock up on the product to meet the demand for this ever popular brand. Vosene Herbal is especially popular at the moment with its frequent wash formula providing a confident shampoo for today's trend of washing hair every day. It also appeals to active individuals who need to wash their hair after playing sport and showering. The fresh, herbal fragrance of alpine flowers gives an added bonus, leaving users confident that their hair not only looks good but smells as fresh as a herbal meadow.

It is a combination of factors which makes Vosene the success story of the shampoo market. Not only does it have universal appeal from family users to the young, single consumer searching for an effective frequent wash shampoo, but both variants have the added benefits of their built-in medicated properties. Who could ask for more in a haircare product? No wonder when consumers are asked what they think of Vosene they reply — "I've always used it and I always will."



## Vosene free towel draw

Here's your chance to win a set of beautiful bath towels from Vosene in our free prize draw. Wrap your Vosene clean hair in one of these rich, green towels — the perfect accessory for any bathroom. All you have to do is send your name and address on a postcard to the following address to be in with a chance of winning one of 10 sets of towels. Good Luck!!

**Closing date: July 31, 1990.**

**C&D/Vosene Free Draw, Promotions Department  
LF/1, SmithKline Beecham Personal Care, SB House,  
Great West Road, Brentford, Middlesex TW8 9BD.**



# PHARMACY update

## Dealing with bruises, strains, aches and pains

**With Summer fast approaching many people may be tempted into getting out for some exercise. Unfortunately many may suffer injury — a sprain, strain, or bruise or worse. Jane Sheridan, Boots teacher-practitioner pharmacist at the centre for pharmacy practice, The School of Pharmacy, London, looks at what help pharmacists can offer these sporty types**

Community pharmacists are often asked to recommend treatment for "aches and pains" relating to muscles and joints. These queries are common in winter as the cold, damp weather may cause joints to become stiff and painful. Also, in the Spring when the keep fit enthusiast comes out of hibernation, bruises and sprains abound.

Joint and muscle pain is usually a result of over-exertion, trauma, change in climate or just "wear and tear". Sprains and bruises are the most common types of sports injuries that will be presented to the pharmacist for advice. A sprain is defined in Butterworths Medical Dictionary as "injury by sudden traction to the muscles, ligaments or articular capsule of a limb, not sufficiently severe to produce rupture of these structures". Stretching or tearing of ligaments especially, can cause severe pain and even immobility of the joint concerned. Bruises are defined as "an accumulation of blood in the connective tissues in the vicinity of an injury, usually visible as a discoloration or



Picture courtesy of Vulkan

swelling under the skin". Bruising which appears two to three days after injury may indicate the presence of a fracture. Bruising with no obvious cause may indicate an excessive blood clotting time, as is the case in haemophiliacs. Patients taking warfarin who bruise easily and with no obvious cause will need to be referred as their dosage may be too high. In any case, bruising

of unknown origin should always be referred.

### Joint pains

Damage to the joints due to the stretching of ligaments and/or muscle damage through trauma should initially, and immediately, be treated with a cold compress or freezing spray. This will help to reduce swelling. After this the

joint should be rested and possibly supported by a crêpe or tubular bandage or sling if appropriate. Counter-irritants may be applied the next day if the skin is not broken, and these should be massaged in two or three times a day. If they are being used in conjunction with a support bandage care should be taken not to strap up too tightly as blistering of the skin may occur.

Direct application of heat is difficult, although some specialists recommend the use of infra red lamps as an aid to the healing process. If joint pains are accompanied by swelling, stiffness and/or bruising there is the possibility of more severe damage. When ligaments tear as a result of injury, they may also cause hairline fractures in the bones to which they are attached.

Joints are also subject to considerable wear through continuous use and pain and stiffness in joints may be due to this. Counter-irritants may be useful to produce relief and a sense of comfort through warmth. Oral analgesics may also be appropriate, although they can mask the pain and the patient may not rest the limb or joint for long enough.

### Muscle pain

Muscle pain may be due to over-exertion where the muscle is stretched beyond usual limits and damage to the tissues ensues causing stimulation of pain receptors. Pain receptors in skeletal muscle are also stimulated by other irritants such as dampness, cold and rapid changes of climate and so produce the sensation of pain. Poor posture and sleeping position may also place extra strain on muscles and so produce this type of discomfort.

The treatment of muscular pain caused by over exertion



**Table 1 Summary of causes and treatment of pain**

Pain	Due to	Treatment	Refer
Neck	Poor posture Over exertion Glandular Injury	IP,TA,R,OA H,R,TA,OA OA C,R,H,TA,OA	If persists 2-3 days after treatment commences. Sudden onset no reason. Accompanied by sore throat and/or fever. In unable to move. If pain radiates down left arm
Shoulder	Poor posture Over exertion Injury	IP,TA,R,OA H,R,TA,OA C,R,H,TA,OA	Persistent and/or if very severe. If pain radiates down left arm. If unable to move. If persists 2-3 days after treatment starts
Elbow	Over exertion Wear and tear Injury	R,H,TA,OA, R,H,TA,OA C,R,H,TA,OA	Persistent pain. Swelling. Immobile. Bruising appears 2-3 days after injury
Knee	Over exertion Wear and tear Injury	R,H,TA,OA R,H,TA,OA, C,R,H,TA,OA	Persistent pain. Cannot support weight. Swelling. Bruising which appears 2-3 days after injury
Ankle	Over exertion Wear and tear Injury	R,H,TA,OA R,H,TA,OA, C,R,H,TA,OA	Persistent pain. Cannot support weight. Swelling. Bruising which appears 2-3 days after injury

**Key**

C = Apply cold compress immediately after injury to reduce swelling.

R = Rest.

H = Apply heat to the area. In the case of injury this should be the following day.

TA = Topical analgesics (counter-irritants).

OA = Oral analgesics.

IP = Improved posture.

includes rest, applying counter-irritants, administration of oral analgesics and, of course, removal of the "irritant" if this is the cause of the pain. Correction of posture and the use of relaxation techniques often relieves the muscular tension that leads to pain.

If the pain is persistent and very severe and/or accompanied by swelling or bruising referral is in order.

**Backache**

Lower back pain of unknown origin is very common and may be due to many years of poor posture, constant and incorrect bending, stretching and trauma possibly caused by lifting heavy objects. Pregnancy and obesity may exacerbate strain on the vertebrae, and discs may become more compressed or worn out causing pain.

Patients may find it difficult to describe the pain, but will often use terms such as "dull ache" or "soreness". The pain is usually worsened by bending or stretching and by long periods of standing or inactivity.

Direct heat or counter-irritants (sprays are useful for those who live alone) are helpful. Oral analgesics may also be recommended, and as with muscle pain, better posture and relaxation will help to reduce back pain.

Back pain tends to be persistent. Severe and

**Table 2 Categories of counter-irritant**

1 Produce erythema and irritation. These are most potent	eg methyl salicylate allyl isothiocyanate
2 Produce cooling sensation	eg camphor, menthol CFC sprays (not environmentally friendly)
3 Vasodilation	eg histamine dihydrochloride methyl nicotinate
4 Irritation without dilation	eg capsicum

inexplicable pain of sudden onset should always be referred to a doctor.

**Counter-irritants**

Counter-irritants (also called "rubefaciants" or "topical analgesics") are available in a variety of formulations (creams, rubs, sprays, liniments) and with a variety of ingredients. When applied to the skin these can produce local inflammatory responses, including erythema, swelling, irritation and a sensation of heat. Stimuli from skeletal muscles travel down the same

pathway to the spinal cord as those from the skin. It is thought that the increase in stimuli due to the application of counter-irritants send antidromic impulses to the spinal cord which block or override the pain stimuli from the muscles, and hence the perception of pain is reduced. However, it has not been proved that the stimulation of heat at the site of application actually improves healing time.

Counter-irritants may be divided into four categories (table 2).

Heparinoid is useful in treating soft tissue trauma because it has

the effect of counteracting the inflammation of trauma by inhibiting proteolysis and the spreading of hyaluronidase.

Patients using these products should be given the following information:

- a Do not apply to broken skin, to mucous membranes or near the eye.
- b Do not apply more than three to four times a day.
- c Do not apply direct heat at the same time as using these products.
- d If using in conjunction with a support bandage, do not strap up too tightly.
- e If symptoms persist or become severe, consult doctor.
- f If irritation to skin occurs, cease treatment.

**Summary**

Patient consultation:

- 1 How did this happen?
- 2 Describe the pain.
- 3 When did this happen and has it occurred before?
- 4 Are there any other symptoms such as swelling, bruising, immobility, broken skin?

As most of these aches and pains are associated with inflammation, they tend to respond especially well to ibuprofen. However one should always bear in mind the contra-indications to its use:

- 1 asthma
- 2 stomach disorders
- 3 allergy to aspirin



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## Pharmacist footshooter?

What a splendid argument in favour of doctor dispensing in the letter from Mr Eric York last week! Five solid inconveniences to patients which do not exist in dispensing practices; chasing up for bandage sizes, the flavour of dioralyte, generic colours, limited list errors and hydrocortisone mistakes. Nor are the trials suffered by the chemist such as parallel importing, foil packs, repackaging, etc, suffered by the dispensing doctor who has his own formulary, is directly responsible to the patient and buys carefully rather than cheaply.

All these are among the reasons why Sir George Young has pressed our amendment so strongly and why the senior principal pharmaceutical officer at the DOH has further warned that the chemists' monopoly may be broken.

It could also be that even Secretary for Health Kenneth Clarke has realised that the £5.5m saved on drugs last year by dispensing doctors would be £80m if all doctor dispensed.

Any other chemist want to shoot themselves in the foot?

**David Roberts**  
*Chairman, Dispensing Doctors Association*

## DHSS only PI winners?

In the article of parallel imports John Barker of Association of Pharmaceutical Importers (*C&D* April 28, p730) "brochure requested as claiming that parallel imported medicines saved the NHS some £7m between May 1988 and July 1989". How, pray, was that saving achieved?

I do not believe that pharmacists using PIs have been meticulously endorsing their scripts for branded products with the nett cost prices of the PIs dispensed, so it can only be through the arbitrary and unfair claw-back imposed by the DHSS on all of us.

Elsewhere in the article it is also stated that pharmacists faced with the blanket discount have little choice but to use PIs. Alas, in doing so we increase the turnover of those who brought us to this parlous state of affairs, and this is much to be regretted.

**V.E.J. Holmes**  
London NW2

## Jason needed the tablets!

Perhaps the TV monologue about Vernon Duxley's distress (*C&D* April 28, p742) was not intended for pharmacists.

I do feel it had to be set in a dispensary as according to my observations, David Jason finished his monologue with a bottle of

Loniten (Upjohn) and Primolut N (Schering) — the former in his right hand to produce a fine hairy chest for his wife, and the other in his left hand, to put paid to that macho image of the bedroom furniture salesman. The Loniten principle seems feasible but Martindale makes no reference to the effect of norethisterone on the male!

**W.M. Ewing**  
Rawtenstall

## ADVANCE INFORMATION

### Advance information

**University of Bradford.** "Heart disease: threat or opportunity?" a national conference, at Bankfield Hotel, Bingley, West Yorkshire, on May 15. Fee £150 (or £95). For details contact Dr J.V. Wheelock, Food Policy Research Unit, on 0274 733466.

**Trinity Health Care Exhibitions Ltd.** "Health Care 1990", at the National Exhibition Centre, Birmingham, on May 22-24. Lectures free for NHS personnel. For complimentary exhibition ticket, contact 0895 58431.

**The Royal Society of Medicine Section of Library and Scientific Research.** "Good clinical practice — the pros and cons", at the RSM, 1 Wimpole Street, London W1 on May 24, at 5pm, together with annual general meeting and election of council. Admission is free. For details contact Miss S. Rex, on 071-408 2119 ext 336.

**The African and Caribbean Pharmacy Association.** Annual meeting, followed by a seminar: "Assistants and technicians in pharmacy", with talks by Mrs Ailsa Benson, head of training, NPA, Ms V. Stevens, chief technician, and Ms R. Onatade, hospital pharmacist, to be held at the London School of Pharmacy, Brunswick Square, London WC1, on May 20, at 3-5pm. Cheese and wine buffet available. For details, contact Ms Charlotte Coker, on 081-556 1124.

**IBC Technical Services Ltd.** **Short Courses:** "Clinical aspects and modern management of asthma", at the National Heart & Lung Institute, London, on May 31-June 1; "Novel methods for the study of anti-asthma drugs", at Gloucester Hotel, London, on June 7-8; "Basic mechanisms of asthma and drug development", at the NHLI, London, on June 21-22; "New horizons in toxicopathology and drug development", at the Royal Society of Medicine, London on July 10-11. For details, contact Fiona Morgan, on 071-236 4080.

**IBC Legal Studies & Services Ltd.** "The 1990 drug law symposium", at the Cavendish Conference Centre, London W1, on June 4. Fee £287.50. For details contact Charlotte Thornton, on 071-236 4080.

**Pira annual seminar,** "Update on dangerous drugs", at the British Film Institute, London, on June 13. Fee £160 (discount for Pira members). For details, contact Val Collinson, on 0372 376161.

**Bradford University.** "Sugar and Health", a conference at Randolph Hotel, Oxford, on June 14. For details contact Dr J.V. Wheelock, Food Policy Research Unit, on 0274 733466.

**Pharmaceutical Marketing Society.** "Formulary committees and how to use them", a conference at the RPSGB, 1 Lambeth High Street London SW1 on June 15.

**European Cosmetic Markets** "The changing face of Europe", a marketing conference at the Sheraton Skyline Hotel, Heathrow, on June 19-20. Fee £747.50. For details contact Nicholas Hall & Co, on 0704 430804.

**Mintel 7th annual retail conference.** "Tomorrow's retailing — juggling for success", at Cinema 1 The Barbican, London EC2, on June 20. Fee £343.85. For details, contact Jayne Mountford, on 071-606 4533.

**National Pharmaceutical Association.** "Management training", a course in Burton-on-Trent, Staffs, on June 25-26 (day one 2pm-5.30pm, day two 9am-5.30pm). Will cover time management, delegation, leadership and motivation, one-to-one training, discipline, job descriptions and standards of performance, staff appraisals, and niching. Fee £224.25 inclusive. For details contact the NPA training dept on 0727 32161.

**Oxford Regional Health Authority.** A return to pharmacy practice weekend residential course, at St Catherine's College, Oxford, on June 30-July 1. Topics will include drug tariff, law and ethics, new drugs and new delivery systems, and personal issues related to returning to work. For details, contact Mrs K. Morgan on 0865 64861 ext 433.

**Medical & Clinical Education and Conferences.** "Wound management: varicose ulcers", at the Royal Society of Medicine, London, on July 5-6. Fee £488.75. For details contact Angela Macpherson, on 0708 745042.

See p841 for Coming Events





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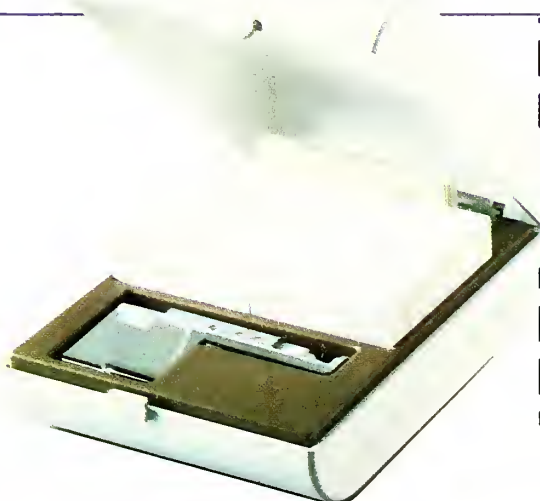
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**START-UP  
OFFER**



# Setting up shop: raising finance

In the second of his series on starting a retail pharmacy, Eric Jensen, B.Com, MRPharmS, gives some tips on raising money

Whether you raise money by a loan or receive a gift, it is essential to have a formal written record of the arrangement. If you are helped by a present from a relative or friend there can be tax implications. Professional advice from an accountant and a solicitor should be sought in every case.

With any loan or gift you should work out a cost-benefit analysis. What material or moral obligations are you taking on, and does raising the money justify them? How much freedom of action are you sacrificing? Whatever the source of your capital you are almost certain to use finance from a bank at some stage, before or after your purchase or starting-up.

## Vital first step

A vital preliminary step is to prepare a plan for submission to any potential lender. Such a plan will be based on the research described in part one of this series (see *C&D* March 10, p365). a projected cash flow for a year or more ahead is needed. With a new pharmacy this is more difficult than when you take over an established business with records of past results. Your forecast should be conservative, making allowances for emergencies and for all the contingencies which might arise, such as new competition or the movement of doctors' surgeries. Distinguish between what is within and what is outside your control.

1 You might be able to finance a purchase or the setting up of a new pharmacy from your private assets. A freehold you own completely, or a substantial gap between a mortgage and the current market value, could be used as security. Alternatively you could sell the property. If you sell, it could mean you will require a business with living accommodation. Work out what return you hope to make by investing capital in a business. Compare this with the return on property. Many pharmacies show much less return on capital than can be obtained from a building society where the risk is minimal.

A life-assurance policy could attract a loan from the same insurance company on favourable terms. Companies like to continue to receive your premiums: they do not want you to surrender a policy.

2 The vendor of a pharmacy is sometimes ready to take payment over a period of years. Try to ascertain the reason. Is the business a poor one or one which he or she is unable to sell without the inducement of special concessions? Do you want such a concern? Some vendors, however, genuinely wish their prosperous pharmacy to remain in private hands and will go a long way to help an aspiring owner. In such cases ensure you have clearly defined who controls the business until you have completed payment.

3 You could consider taking on a co-director



**"Before you consider taking on a heavy debt burden you might ask whether you should first accumulate more capital of your own. A few years of frugal living and careful investment can often pay handsomely"**

whose funds combined with yours would enable you to reduce or eliminate outside borrowing. But if the colleague is to work full-time in the business you would need a very remunerative enterprise. Also you would probably have to sacrifice some of your freedom of action.

4 You could seek a guarantor for a loan from a bank: normally you would have to make some payment to the guarantor as well as paying interest and making capital repayments.

5 More than one of the wholesalers and business transfer agents in the pharmacy field offer assistance in raising finance. As with all borrowing, check carefully the commitments you take on.

6 Obtain details of the NPA facilities. You can draw on a wealth of experience in the financial aspects of pharmacy. And any business would be vetted by experts.

7 "Investors in Industry" (3i) have offices in several towns. It is worth exploring what they can offer.

8 The BES (Business Expansion Scheme) and other official schemes should be discussed with your accountant and bank manager. The BES has had publicity in *C&D* (February 3, 10 and 17). The tax benefits to an investor can be substantial. The pharmacist involved must study closely his or her position at the end of the five year period. Business forecasting is a high risk occupation: who can tell what the

value of shares in a pharmacy is likely to be five years ahead?

9 A franchise offers help with finance plus merchandising, etc, and advertising. It is essential to be clear as to the "zone" you have and the full cost to you directly and indirectly. The BFA (British Franchise Association) should be approached for information.

10 Whether or not you borrow from a bank to facilitate your purchase or your setting-up of a new pharmacy you are probably going to need credit facilities, either when the business is operating or after purchase. Take advice from your accountant on the pros and cons of a floating over-draft and a fixed loan. The former could be called in at any time! Be wary too about the security you give. Aim not to tie up more security than is essential. If you do you could be short of something in reserve in case you need security for further borrowing later on. The bank's interest is to hold the maximum security, yours to accord the minimum. You must have expert advice.

11 As a final resort you could seek money from one of the finance houses. Here interest rates will almost certainly be higher than from other sources: rates depend on the risk involved. If none of the other prospective lenders has been ready to accommodate you it is patent that the risk has been considered too high.

Assuming the case has been efficiently made out but you have nevertheless been unsuccessful you should ask yourself the crucial question: "Is this pharmacy not worth buying or this site not viable?"

12 Before you consider taking on a heavy debt burden you might ask whether you should first accumulate more capital of your own. A few years of frugal living and careful investment can often pay handsomely. Similarly, such a policy after you have bought could later reduce your debt and interest enormously. With any loan, find out whether you can make early repayment without penalty.

## General rule

As a general rule you should try to find at least half your purchase needs from your own resources. At the current prices of average sized pharmacies this could well mean you want £50,000 to £75,000 of your own.

You should be able to start a business for a lot less than the sum mentioned. There are powerful arguments in favour of choosing this alternative. Only do so, however, after the most painstaking research.

### For reference:

"Risk Capital For Small Firms" (Small Business Research Trust) ISBN 1-871672-15-5. £10.00.

"Capital — how and where to raise it" Prestige Publishing, 61 Mill Hill Close, Poole, Dorset BH14 8RL. £9.99.



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**Wellcome**



# Core syllabus for continuing education?



A national curriculum and certificates for course attendance are among proposals to strengthen the provision and uptake of pharmaceutical continuing education.

The proposals arose from a report on postgraduate and continuing education prepared by the Council's working party on pharmaceutical education and training, Part III.

Council agreed at this month's meeting that there should be a national curriculum embracing a core syllabus and specialist syllabuses for continuing education in each of the major aspects of pharmacy practice, ie, community, hospital, industrial, agricultural and veterinary pharmacy, academia and administration. A working group would be established to define the syllabuses by late Spring, 1991, and the format and contents of all parts of the curriculum would be subject to regular review involving consultation with the profession.

The Royal Pharmaceutical Society would specify and review minimum annual levels of course provision and of support (such as study leave) to allow pharmacists to participate.

Council also agreed to issue regular guidance recommending appropriate continuing education for practising pharmacists. It would encourage the development of a variety of methods of course delivery, would be the focus for an organisation of course providers and would act as a resource centre/library for teaching materials, subject to support from outside funding.

It was agreed that both preregistration graduates and preregistration tutors should be required to engage in accredited continuing education activity during the preregistration year. But it was decided that further consideration should be given to proposed requirements for the vocational training of pharmacists, taking into account, among other things the views of potential employees.

Other recommendations included a proposal that certificates should be awarded after successful completion of certain accredited courses involving assignments or assessments.

**Preregistration in independents** Council welcomed in principle an initiative by a commercial organisation to provide preregistration experience and training services to small multiple and independent community pharmacies. The service would provide assistance in obtaining approval of premises for preregistration purposes, help with graduate recruitment and the provision of training programmes.

The Education Committee noted that the scheme's aims were compatible with the Society's aims regarding preregistration experience. The scheme could provide improved training for students not participating in employers' structured preregistration programmes.

## 'Has the company concerned experience in preregistration training'

When the matter came before the Council, Dr D.H. Maddock asked whether the company concerned had experience in preregistration training.

Nick Wood (chairman, Education Committee) replied that the organisation had originated as a locum agency and now had a section dealing with preregistration placement. Its proposed programme was considered acceptable.

The secretary and registrar, John Ferguson, said the company principals were pharmacists. The submission had been examined in detail and the Committee had recommended a positive approach. However, the approval would have to comply with the basic principles of the Society's preregistration programme, and if there was any departure the approval would be withdrawn.

**Promoting health** Council agreed to encourage pharmacies to stock and sell health promotion material such as health education books and videos.

A recent meeting of the co-ordinating group of pharmacy organisations on public relations in community pharmacy had considered the desirability of pharmacies stocking such materials. Health food shops sold

a range of publications on health education, and the group felt it would be more appropriate for pharmacies to stock such items.

The community pharmacy subcommittee observed that pharmacists seemed to be failing to take advantage of the opportunity to sell health promotion materials. The National Pharmaceutical Association had carried out a successful pilot scheme and was currently involved in discussions with publishers on the wider availability of a series of books on health subjects. Some pharmaceutical wholesalers had a range of books and some pharmacies were experiencing a reasonable demand.

The Council thought that, because health promotion books and videos were concerned with health rather than sickness, there might be merit in them being sold from areas of the pharmacy not associated with the sale of medicines. It was also agreed that Society spokesmen should take every opportunity to promote this role.

**Need for PR** The secretary and registrar reported on the progress of the NHS and Community Care Bill through the House of Lords. All the amendments tabled had been examined carefully to ensure that there was nothing detrimental to the interests of pharmacy, and consultation with the Pharmaceutical Services Negotiating Committee was continuing.

Dr Maddock said that patients should be able to see clearly that community pharmacists in their extended role were indispensable. He suggested that the Council should consider formulating an appropriate public relations strategy. The treasurer, David Sharpe, agreed that the Society should hasten the public relations effort to bring pharmacist's indispensability to the attention of the whole population.

Dr N. Evans said the changes in pharmacy education stimulated by the Nuffield report were also needed together with an even greater emphasis on standards of practice and ethics. Dr Alison Blenkinsopp agreed that a public relations exercise had to be accompanied by the continuing development of pharmacy practice.

Lord Peston believed there were questions on the economic of pharmacy practice that could not be answered because the relevant research had not been done. As a result, crud calculations such as those the dispensing doctors had put forward seemed to carry the day because they were all that were available. If there was not a proper research base, anyone could gain credence for all sorts of propositions. He would feel happier if the Society's public relations was based on the best available evidence.

**Support for EC homoeopathy proposals** Council agreed that the Society should support European Community proposals for simplified registration procedure for homoeopathic medicinal products.

The proposals, contained in draft EC Directive, were considered by the Practice Committee's community pharmacy subcommittee. The simplified registration procedure would apply only to products which satisfied a number of conditions, including requirement that they should be marketed without any specific therapeutic indication being shown on the label or on accompanying product information. The subcommittee supported the proposal, but felt that therapeutic indications should also be prohibited in an associated advertising and in any publications sold from the same establishments as the product.

Other conditions for the simplified procedure included restriction to oral or external administration and a sufficient degree of dilution to guarantee safety. Products not fulfilling those conditions would have to go through the full medicine licensing procedure, which would require proof of therapeutic effects.

The Directive would apply to industrially prepared medicine but not to homoeopathic preparations prepared and sold in a pharmacy. All preparation would have to be labelled with the words "homoeopathic medicinal product".

It was also noted that any member State could refrain from establishing a registration or



thorisation system for homeopathic medicines but could have to allow the use of products registered or authorised in other member States. With this in mind, the subcommittee was in favour of the UK introducing its own system.

Council agreed that the comments should be conveyed to the appropriate body considering the draft Directive. Any comment made by the Society would concern only the licensing procedure and could not be taken as either endorsement or rejection of homeopathy.

**Expiry date labelling** A letter has been received from the Medicines Control Agency on the interpretation of Regulations which, from January 1, had introduced a statutory requirement that all human medicines should be labelled with an expiry date in plain language. There had been confusion as to the effect of the requirement on community pharmacists, as there were still many products without expiry dates on pharmacists' shelves. The MCA's interpretation was that medicines leaving the factory after January 1 had to show an expiry date and that human medicines supplied by the manufacturer before that date could continue to be sold or supplied without an expiry date.

**Advertising in GP leaflets** Council decided that, subject to the Society's annual meeting approving the proposed amendment to the Code of Ethics on publicity for pharmaceutical services, there should be no objection to pharmacies sponsoring or taking advertising space in GPs' practice leaflets. A ban on such advertising could not be sustained in the current climate and announcements in GP practice leaflets would not be contrary to the principles of the proposed revision of Paragraph 7 of the guidance notes.

**Virtues of pharmacist dispensing** The Ethics Committee approved draft wording for a document setting out the virtues of dispensing by pharmacists rather than dispensing doctors. The document was intended to support public relations campaigns in the case of dispensing disputes.

**Symbol for needle exchange** Council decided to take no action on a proposal that the Society should take the lead in devising a symbol for identifying pharmacies involved in needle exchange schemes. These schemes were normally well known to drug misusers and the display of a symbol might deter other patients and customers.

**Safe disposal of insulin needles** Council agreed that a letter should be sent to the British Diabetic Association asking it to promote the use of needle clippers to ensure the safe disposal of insulin needles. A

district pharmacy manager had said that the lack of a satisfactory disposal system for sharps used by insulin-dependent diabetics was causing concern both among those responsible for implementing the Control of Substances Hazardous to Health Regulations and in the district's control of infection committee. He said that the association's recommendation to use cola drink cans or jam jars was not the answer, and suggested that diabetics needed individual sharps containers. As needle clippers were available on the Drug Tariff it was suggested that their use would obviate the need for the more expensive sharps containers.

**Labelling affecting controlled dosage** The Medicines Control Agency is to consider the question of modifying the labelling Regulations affecting controlled dosage systems. The Society had written to the MCA on March 14 pointing out the difficulty of labelling controlled dosage systems in accordance with legal requirements and requesting appropriate amendment to the Regulations. In its reply, the MCA accepted that the systems had raised problems in complying with the Regulations and possible difficulties regarding patient leaflets. It was considering these problems, particularly in the context of the current European Community proposals on labels and leaflets.

**Failure to investigate counterfeits** Council agreed that a letter should be sent to the Department of Trade and Industry expressing concern at a London borough's decision not to investigate sales of counterfeit topical steroid preparations containing no active ingredient. The Society had referred a number of such cases to various trading standards departments for action, because it was only when active ingredient was present that the Society had a duty to prosecute alleged offenders.

The borough concerned had written to the Society stating that it did not have the resources to investigate the complaint and would not be able to take any necessary enforcement action.

**'Thick' sandwich** Council decided that the Society's Byelaws should not be amended to allow students to follow a "thick" sandwich course, with a full year's practice placement before the final year of the academic course.

It was agreed that the few students who had already been accepted on "thick" sandwich courses would be able to register under the discretionary powers of the registrar, but it was further agreed that no such registrations should take place for graduates starting their course after 1990.

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# Pharmacies show personal care growth potential

Grocers' strength in personal care product sales is being helped more than ever by their dominance in selling food which is bringing them massive customer traffic.

Nevertheless pharmacists need not lose heart. Latest figures from market analysts AGB show independent pharmacies holding their own particularly in the buoyant areas of toiletry, skincare and oral hygiene and in the more specialist products that grocers find hard to display to full advantage.

There is good news for independent pharmacists in the personal care markets monitored by AGB. In the sector still showing strong growth in volume and value — oral hygiene — independents have also shown their best performance over the past year. And in the overall market independents have performed on a par with Boots. That is particularly gratifying considering the grocery sector's strength in the personal care markets, helped very much by the fact that they are doing so well on the food side, which is bringing the customer traffic through their stores so helping move toiletry products off their shelves. Grocers have made a particularly strong impression in the haircare market where they now account for 30 per cent of sales.

The grocers have also done well with oral hygiene goods — consumers buy about half their oral care products — (by value) from these outlets. But once again it is an area where independent pharmacies have held their own. Pharmacies' continued good performance may be due in part to the drugstores' collective weakness possibly, suggest AGB, because Superdrug are now so dominant that drugstores have been synonymous with the one outlet in consumers' minds.

Other sectors in the personal care markets monitored by AGB are fairly static. The 12 per cent increase in fragrance sales reflects business done at Christmas. The hard toiletries sector is being pushed along mainly by activity on razor blades where systems are showing good growth. Gillette are particularly strong in this area and more activity from them with the launch of Sensor could fuel further growth.

## Bathroom business

The weather could hold the key to a good Summer for bathroom toiletries which includes deodorants, bath additives — liquids, salts and shower products — toilet soap, medicated skincare, skin cleansers and luxury and specialist soaps, talc, sun

preparations, baby skincare, body sprays, shaving preparation and men's hair preparations.

Deodorants have been particularly buoyant over the past year (worth £136.1m in the 12 months to February) and another good Summer should stimulate sales further. There is a general trend away from hard soap to liquid products. Indeed hard soaps are among the slowest moving of

the bathroom products. Nevertheless luxury and specialist soaps still sell well as gift items.

As far as shower products go men's products and those for body and hair use could do particularly well this Summer. For men Lynx stands out as a good performer. It is the growth in demand for "portable" toiletries for sports bags and travel use together with increased male

## SECTOR TRENDS — BATHROOM TOILETRIES

	£m	£m	£m	% change
Bath additives	121.5	114.2	123.3	+8
-liquids	82.4	80.1	83.2	+4
-salts	7.0	7.4	6.8	-8
-shower	30.6	25.3	31.8	+26
Toilet soap	90.8	87.3	91.5	+5
Medicated skincare	15.7	15.5	16.0	+3
Skin cleansers	46.4	41.7	46.6	+12
Luxury/specials soaps	23.8	26.6	23.3	-13
Year ending	Dec 89	Feb 89	Feb 90	

Source: AGB Market Track

## SECTOR TRENDS — RAZOR BLADES

Total razor blades (measured in millions)	407	416	year on year change %
	% share	% share	+2
Disposables	68	69	+3
Systems	20	21	+10
Double edge	11	9	-20
Bought with razor	1	1	

Year ending February 1989 1990

Source: AGB Market Track

## TOP BRANDS

Taking a comparison of 1985 with 1989 the top brands in each sector are as follows: (1985 rankings are shown in brackets):

### Bath liquids

- 1 Radox Herbal (1)
- 2 Avon Bubble Bath (2)
- 3 Badedas (3)
- 4 Johnsons Baby (9)
- 5 Matey Original (5)

### Shower products

- 1 Avon (1)
- 2 Radox Shower Fresh (2)
- 3 Lynx (-)
- 4 Imperial Leather Gel (4)
- 5 Badedas (11)



## TOTAL PERSONAL CARE MARKET MARKET & SECTOR TRENDS — VALUE

Total market (£m)	2318.7	2482.4	+7	339.9	372.9	410.7	415.0	407.2	503.1	360.8
	£m						£m			
Cosmetics & skincare	386.6	379.4	-2	53.9	67.0	62.2	58.0	61.2	77.7	53.3
Fragrances	375.9	421.9	+12	40.9	47.6	58.7	59.7	73.1	136.1	46.2
Haircare	481.4	506.4	+5	80.2	83.5	84.7	83.9	85.8	85.7	82.5
Bathroom toiletries	664.2	709.0	+7	93.9	100.4	127.1	132.5	108.7	129.6	98.4
Hard toiletries	207.0	226.6	+9	35.3	36.9	38.7	40.5	37.9	34.8	38.0
Oral Care	204.0	239.2	+17	35.8	37.5	39.2	40.4	40.5	39.1	42.4
12 months ending	J/F 89	J/F 90	% change	2 m/e 89	J/F 89	M/A	M/J	J/A	S/O	N/D J/FT 90

## TRADE SECTOR SHARES — DEFINED TOILETRIES

Total market (£m)	1557	1631	+8	245	258	290	297	273	289	261
	% value						% value			
Total chemists	33.4	31.3	+4	33.7	32.7	32.9	34.2	30.7	31.3	30.8
Total Drugstores (+ Woolworth)	15.9	15.3	+4	15.3	15.4	15.6	15.6	15.6	14.8	15.4
Multiple grocers	31.4	32.8	+13	33.7	33.7	32.3	31.1	34.2	31.7	35.4
Other grocers	6.9	7.0	+9	6.9	7.2	6.8	7.2	7.9	6.3	7.0
Department stores	2.0	2.0	+5	2.0	1.6	1.9	2.0	2.0	2.2	2.0
Other outlets	10.4	10.6		8.4	9.4	10.5	9.9	9.6	13.7	9.4
12 months ending	J/F 89	J/F 90	% change	2 m/e 89	J/F 89	M/A	M/J	J/A	S/O	N/D J/F 90

## TOTAL PERSONAL CARE MARKET TRADE SECTOR SHARES — TOTAL INDUSTRY

Total market (£m)	2319	2482	+7	340	373	411	415	407	503	361
	% value						% value			
Total chemists	36.4	35.6	+5	37.4	35.7	36.4	35.3	33.1	37.5	34.2
Total Drugstores (+ Woolworth)	12.1	11.6	+3	12.2	11.7	12.2	12.3	11.8	10.3	12.0
Multiple grocers	21.8	22.8	+12	25.0	24.0	23.4	22.8	23.6	18.9	26.2
Other grocers	4.9	4.9	+5	5.0	5.1	5.0	5.3	5.4	3.8	5.1
Department stores	8.3	8.3	+7	7.1	7.5	7.3	7.4	8.0	12.2	6.6
Other outlets	16.5	16.8		13.3	14.7	15.7	16.9	18.1	17.3	15.9
12 months ending	J/F 89	J/F 90	% change	2 m/e 89	J/F 89	M/A	M/J	J/A	S/O	N/D J/F 90

purchase (accounting for almost one in three products by value in 1989), which has driven the sector forward so much lately.

Sun preparations is another category that will shine along with the sun. Sales to February this year, at £77.6m, were 24 per cent up on the 12 months to February 1989. Facings are already appearing so all that is needed is a continuation of the recent hot spell and another good year should be in prospect. That could be good news for Nivea which has perhaps lost ground to other facial skincare products over the Winter, but could pick up as people become interested in aftersun toiletry preparations. It could in turn give a general stimulus to toiletry skincare sales.

For pharmacies these forecasts contain a mixture of good and bad news because on commodity toiletry lines such as the shower products, shampoos and deodorants they have lost sales to the grocers. However, pharmacies are stronger on the more specialist lines and those where grocers have problems with displaying whole ranges because of the amount of space that would take up. So pharmacies can expect to do well with the more specialist skincare ranges which have themselves shown good growth over the past 12 months. Roll-on and stick deodorants also sell well in pharmacies, say AGB, so moves to those should favour independents.

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# BUSINESS NEWS

## Antivirals lift Wellcome

Interim results for Wellcome plc show turnover up 26 per cent to £733m and pre-tax profits up 28 per cent to £164m for the 27 week first half of 1990.

Antivirals made a particularly strong contribution, with sales of £265m representing 36 per cent of the turnover.

Retrovir sales alone have risen from £59m for the 26 week first half of 1989 to £88m this year. Making allowance for the extra accounting week in this year's first half results this still represents an increase of nearly 44 per cent.

### Wellcome interims:

Turnover up 26pc to £733m

Pre-tax profits up 28pc to £164m

Earnings per share up 28pc to 11.5p

Interim dividend 1.5p

Outgoing chairman and chief executive Sir Alfred Sheppard commented: "The increase was in spite of the 20 per cent price reduction made in September 1989 and changes in the dosages used."

Exchange rate movements overall had a favourable effect on the group results, increasing turnover by £45m (7 per cent) and pre-tax profits by £18m (14 per cent).

Earnings per share have improved from 9.0p to 11.5p, and the company have announced an interim dividend of 1.5p, up from 1.3p in 1989.

Wellcome have recently received approval from the FDA to promote Zovirax capsules for the treatment of herpes zoster, or shingles. The company have also successfully filed for the use of the drug against chickenpox in children.

The Secretary of State for Trade and Industry has decided not to refer the proposed acquisition by Rhône-Poulenc of 68 per cent of the share capital the Rorer Group to the Monopolies and Mergers Commission.

## Macarthy buy retail chain in Jersey

Macarthy have bought the Jersey pharmacy chain Bryants Chemist (1983) for £2.5m cash. The chain consists of six pharmacies of the 21 on the island. The business was started in 1983.

Cameron Scott, Macarthy's managing director, retail division, who saw the acquisition through commented: "This fits in very well with Macarthy's business strategy. We have always said that as a business we are acquisitive, and this is a part of planned expansion of our retailing activities."

Macarthy already have experience in managing island pharmacies with their G.J. Maley chain in the Isle of Man.

Unaudited management

accounts of Bryants show sales of £2.7m and profits before tax of £125,000, after deducting central costs and interest of £234,000.

Bryants are not customers of Macarthy, and initially at least the company has no plans to change this. "They are currently being supplied very well," said Mr Cameron, "and while some aspects of the business could be centralised in the future, at present we are just going in and learning the business."

Commenting on the funding of the deal Group financial director Stephen Oakley said: "The purchase price has come out of group resources and we do not expect the acquisition to have any effect on our year-end gearing."

## UBR: rates rise danger

Retailers appealing against their Uniform Business Rate assessments could end up paying more. This is the outcome of a new power of the Valuation and Community Charge Tribunal which allows it to increase as well as decrease rateable values.

However, a case will only get as far as the VCCT if the dissatisfied retailer cannot reach agreement with the valuation officer. But it does mean that the appellant should make certain he or she has good grounds for

challenging the assessment before it gets as far as the tribunal. The valuation officer may invalidate an appeal if it does not include all the relevant correct information.

Both the new legislation and the appeals procedure are very complex and many retailers may benefit from professional advice unless they are completely confident of the rules.

Appeals can be made until September 30, and generally the right to appeal belongs to the owner or occupier of a property.

## Your flexible friends

Signet, the Access processing company owned by the Access banks, is to cease to deal directly with retailers from May 31. Retailers will now be able to use any of the Access banks or Barclays Merchant Services to process both Access and Visa transactions.

According to Barclays Merchant Services managing director Mervyn Gibson, letters

from Signet to retailers informing them of the decision are misleading.

Barclays advertisements advise retailers that if they have an agreement with Barclays Merchant Services they do not need to sign an agreement with another bank because Barclays Merchant Services can process both Visa and Access/Mastercard transactions.

## UK against 'poison pills'

The Government should take action to eliminate EC practice which act as barriers to takeovers. This was the response received by the DTI to a consultative document on the subject.

The barriers identified included unequal voting rights; accounting problems; poison pill tactics; the regulation of takeovers; and cross shareholdings.

Accounting problems headed the list: there was general agreement that difficulties in obtaining basic accounting information was a major barrier to identifying possible acquisitions. Poison pill tactics — frustrating a hostile bid by issuing extra share capital, say, without consulting the shareholders — was also considered to be an important barrier, though there was no consensus on the right way to deal with it.

However, while respondents to the DTI consultative document agreed cross-shareholdings were a barrier they all argued it was impossible to distinguish such holdings from those held for genuine commercial reasons.

There was no agreement on how to tackle problems on the regulation of takeovers, but a number of respondents expressed concern that the UK might have to change its own practices in this area.

## Healthy sale

Wardell Roberts, the Dublin-based processor and distributor of food products have conditionally agreed to acquire Healthlife (Holdings), a Leeds-based blender and distributor of food supplements, says a *Financial Times* report.

They will pay an initial £2.84m-£2.44m cash and £400,000 in loan notes — with further profit-related payments to a maximum of £3m. Wardell have also announced plans to raise £4.11m through a rights issue.



# IN THE CITY

The better than expected performance by the Tories in the local elections has brought a whiff of optimism to the stockmarket. Share prices have seen some good gains in the past few days but the advance looks fragile due to inflation worries.

Against this background, the health and household sector has fared well. Although the sector saw a sharp dip in February, there has been a rebound in share values in recent weeks. As a result, pharmaceutical shares are now showing a modest 2 per cent outperformance over the rest of the market, with much of the attention focussed on blue chips.

Much of the recovery has been on the back of a change in investor sentiment. It is felt that the February slide was over done and a good result from Glaxo earlier this year helped to buoy share prices.

The company was in the limelight again this week, thanks to its involvement in the development of an Aids drug with a Canadian company, IAS Biochem. A series of institutional presentations by the Canadians in London, their second visit in a month, have further boosted Glaxo shares.

The drug, coded BSH 189, has yet to be tested on humans but Glaxo is believed to be very optimistic about its progress. It could be approved for use in the next two years.

This week also sees first quarter results from Smithkline Beecham and Smith & Nephew. City analysts are looking for taxable profits of about £245m from Smithkline, against £235m last time. However, the market is more interested in seeing whether the merger of Smithkline with Beecham is producing any significant benefits.

After a tough 1989, analysts are looking for signs of recovery at Smith & Nephew's US operations. Most City forecasts for the first quarter are pitched at around £32m against £29.2m. There is likely to be a significant currency gain for the group, offset by problems in the examination gloves market in the US.

Amersham International continues to be out of favour with investors. Full year results are due in June, but there has been another round of downgradings from analysts recently. Most are now looking for taxable profits of around £15m before tax.

The shares have also suffered due to institutional shareholders reducing their stakes.

## North West Ostomy sold

The Intercare Group have added a third division to their business with the purchase of the North West Ostomy Group for £565,000. The company is also moving from the Third Market to the USM.

The acquisition is part of the group's strategy to move into general healthcare, and will be run as a separate division alongside Pennine Optical, the distributor of optical frames, and A-Z Dental Holdings Ltd, the crowns and bridges manufacturer.

The North West Ostomy

Group comprises North West Ostomy Supplies (Wholesale) Ltd and Nursing Aids & Appliance Centre Ltd. The wholesale business supplies specialised ostomy and incontinence appliances to more than 1,100 retail chemists.

Following the acquisition, Peter Nuttall, the principal vendor, will continue on a full time basis for three months.

Intercare group director Michael Radnor will eventually take over as managing director of the North West Ostomy Group.

## Park Systems' new labelling

Park Systems are launching a new version of their PMR labelling system incorporating a range of new facilities.

The company says the system has a new drug interaction system, designed by Drs Mottram and Rowe, giving a comprehensive range of interaction alerts and various grades of warning messages.

A new drug/patient interaction

alert checks for drugs which should not be prescribed.

The new hardware is based on a 286-processor PC compatible with a 40MB hard disc and paper white screen monitor. It costs £2,500 (after NPA rebate) plus VAT, for computer, printer, all cables, manuals, software, installation and training Brochure. Park Systems Ltd. Tel: 051-298 2233.

### COMING EVENTS

## Crookes link

AAH Pharmaceuticals and Crookes Healthcare have organised two joint training evenings — for the benefit of AAH customers in Reading and Brighton. This follows on from last year's pilot scheme introduced in the Swansea area.

On May 22, the Brighton Metropole Hotel provides the venue for the first in the new series, and the second will take place on the following evening at the Caversham Hotel in Reading.

The seminars will start with a presentation on customer care from Vantage training controller Ken Howells, followed by a product knowledge session with an introduction to the E45 range by Pamela Watson of Crookes Healthcare. The business programme will be followed by a

social evening and buffet supper.

Admission is by ticket only. For further details contact Ken Howells on 0928 717070. Two similar evenings are planned for customers in Edinburgh and Gateshead in September.

## Unichem giveaways

One Unichem member will drive away from this month's trade show at Thorpe Park in a new Peugeot GTI convertible. The £9,500 fully taxed car is first prize in a joint competition with Peaudouce. All members who place an order at the show and enter the competition will have the chance to win it.

The car is just one of the prizes

that can be won when members place orders at the show. Others include a portable television radio alarm and an Olympus AFI super camera. Unichem will also be giving away T-Shirts, frisbees, bugs, balloons and hats.

## CPP & NAWP study day

The College of Pharmacy Practice and the National Association of Women Pharmacists are holding a joint study day on hormone replacement therapy (HRT). It will take place at BMA house, Tavistock Square, London WC1 on June 12. The fee for the day is £15, and the closing date is May 31. Details from the CPP on 071-735 0418.

### Monday, May 14

**North Metropolitan Branch, RPSGB.** School of Pharmacy, Brunswick Square, London WC1, at 7.30pm. Annual meeting, plus "Accountancy for the small business", by Mr Dilip Patel, senior lecturer in accountancy and finance.

### Tuesday, May 15

**Bath Branch, RPSGB.** School of Pharmacy and Pharmacology, University of Bath, at 8pm. "The work and scope of the UK transplant service", by Mr Derek Moras.  
**South Staffordshire Branch, RPSGB.** Civic Hall, Lichfield, at 7.30pm. "Homoeopathy in the pharmacy", by Weleda (UK) Ltd. Buffet available.

### Thursday, May 17

**Weald of Kent Branch, RPSGB.** Postgraduate centre, Kent & Sussex Hospital, at 7.45pm. Annual meeting, plus "Current pharmaceutical affairs", by Professor T.G. Booth, past president RPSGB.

Advance information see p832



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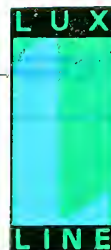
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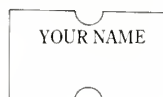
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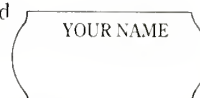
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# ABOUT PEOPLE

## Poetry in motion

Pharmacist Martyn Hudson, who turned poet in his bid for sponsorship in the Portsmouth Half Marathon in March (*C&D*, February 24, **About People**), raised nearly £500 for charity.

"My run was successful, if slightly painful," says Martyn. "My sincere thanks to all the pharmaceutical companies that responded to my 'Ode to the '90s'. The donations from Milupa and Mates were most generous, but a special mention must go to Panpharma, who not only responded with a large cheque, but also with a poem":

"We gather you put your mettle on test, completing those miles along with the rest, determination and grit, abounded on doubt, as the corners progressed — 'the finish' — the shout.

The weeks of pain, when training took place, not winning, but finishing, the charity race.

The end was in sight on the 11th March, past sycamore, elm, oak tree and larch.

Your ode to us was a sponsorship quest, to help when you ran in your shorts and vest, unfortunately time was against us just then, and the 'action delay' happened again!

However today, we spout verse upon verse, to inform you with glee that we open our purse, the pounds have jumped out and, sat on a cheque, which we will soon present as you've ended your trek.

We offer our wishes of thanks and God's speed, for a complete recovery to those in need.

All the best from Panapharma for the 90's decade, and hope you go far in your personal crusade."



The winner of the 1990 AAH Pharmaceuticals' top salesperson award is Link Pharmacy Systems representative Mr Pam Kohli (centre left) of Luton, who celebrates 35 years service with the company this year. He received his award from marketing director Alan Turner (far left) at the sales conference at Park Hall, Chorley. Several other AAH representatives received merit awards at the conference: Gail Duddy (centre r) of Edinburgh was Vantage salesperson of the year; top Link Computer Systems representative was Scotland's Margaret Gardiner (far r); newcomer of the year was Anne Greenaway (second l) of Footscray; and the South Eastern region won the top sales team award. Also pictured is sales manager Richard Elliott.

## Scottish elections

Voting papers are being circulated for the election of the Executive of the RPSGB Scottish Department and must be returned by 4pm on June 6.

There are six vacancies, and the candidates standing for election are:

**Mr George Edward Allan**, MRPharmS, of Edinburgh, registered in 1973. Community pharmacist/director in family company. Committee experience as a member of the executive of the Scottish Pharmaceutical Federation since 1984.

**Mr David Alexander Bolton**, MRPharmS, of Dunfermline, registered in 1969. Lothian Health Board, member of the RPSGB working party on pharmaceutical education and training (Part III). Chairman of the Pharmacy Liaison Committee for technician training, Telford College, Edinburgh. Vice-chairman of the PQEB for Scotland. Member of the editorial board "Pharmacy Management".

**Mr Kenneth John Gray**, MRPharmS, BSc, of Bridge of Allan, registered in 1970. Proprietor pharmacist; member, Forth Valley Area Pharmaceutical Committee, and Chemist Contractors Committee. Member of British Society for the History of Pharmacy. Society observer on Pharmaceutical

General Council. Member of Executive since 1975 and chairman since 1988.

**Mrs Mary Hay Lachie**, MRPharmS, MBA, ALA of Edinburgh, registered in 1962. Industrial pharmacist; manager of research services, Syntex Research Centre, Edinburgh. Member of the National Appeals Panel and Lothian Pharmacy Practices Committee.

**Mrs Betty Carnegie Montgomery** FRPharmS, BSc, MCPP, of Alexandria, registered in 1960. Principal pharmacist from 1973 with responsibilities for Argyll and Dumbarton Unit. Member of Scottish Executive since 1975.

**Mrs Elizabeth Fleming Roddick** MRPharmS of Glasgow, registered 1972. Proprietor of community pharmacy in Glasgow since 1982. Member of Chemist Contractors' Committee and G.P. Sub-Committee, Greater Glasgow. Member Standing Committee, Pharmaceutical General Council (Scotland).

**Mr Ronald Andrew Shiels**, MRPharmS, BSc of Inverness, registered in 1970. Proprietor pharmacist of community pharmacy. Member of the Pharmaceutical General Council and its Standing Committee. Co-opted to the Scottish Executive in 1988.

## APPOINTMENTS

### New PMS chairman

The Pharmaceutical Marketing Society elected Geoff Brook as chairman, at its annual meeting at the end of April. Mr Brook is advertising consultant and media manager at CBA & Associates.

Keith Halsewood will serve as deputy chairman, and Bernard Harlock as treasurer.

■ Founder and former chairman Nick Henderson proposed a vote of thanks to retiring chairman Bill Nash, for his leadership in changing the former club into a serious society over the past two years.

**Crookes Healthcare** have appointed Jane McCahill as special project and promotions manager reporting to Jon Edwards, national sales manager.

**Leeds Industrial Co-operative Society** have appointed Roys Henstock as superintendent pharmacist responsible for their 15 pharmacies, eight optical practices and one photographic outlet.

**Sangers Ltd** have appointed David Gleeson as national key account manager; he was previously area sales manager. And Jonathan Williams has been appointed as sales force representative for Wales.

**Interphex 90**, the 12th international exhibition and conference for the pharmaceutical, cosmetic, toiletry, perfumery and allied industries, have appointed Julie Keeble as exhibition director.

**Cyclax Ltd** have appointed Alison Thorpe as marketing manager. Lenthic Morny. Ms Thorpe will be responsible for Cyclax skin care products, Morny soaps and toiletries, and Adidas toiletries.

**Hall Brothers** have appointed Caroline Horril, as marketing manager.



# WHY DOES **bonjela** DOMINATE THE ORAL GEL MARKET?

35.1% £\*



8 BRANDS

62% £\*



1 BRAND

## A N S W E R

- Bonjela provides up to 4 hours pain relief per application and can therefore provide up to 24 hours pain relief in 6 doses.<sup>1,4</sup>
- Bonjela has an anti-inflammatory action that will reduce the inflammation of the gums.<sup>2,3</sup>

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# New research study results

## How chewing gum rapidly curtails two hour plaque acid attack



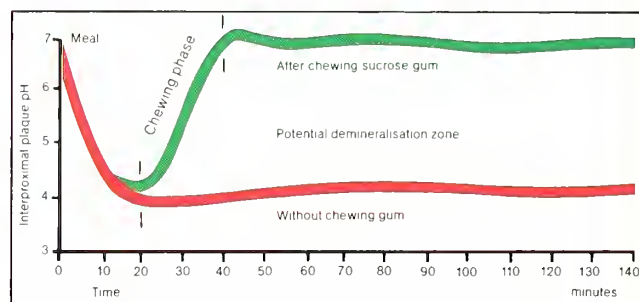
Most meals and snacks increase plaque acid production.<sup>1,2</sup> Research shows that this acid threat may be prolonged and the new study demonstrates that two hours or more can elapse before acid in the interproximal sites is neutralised.<sup>3</sup> And with five or six snacks a day being quite common, many patients' teeth may be at risk for long periods of the day.

The chewing of gum after eating triples salivary flow<sup>4</sup> and delivers saliva throughout the mouth, reaching even interproximal sites where carbohydrates may be trapped.<sup>1</sup> As a result, acid is neutralised quickly and plaque pH is returned to, and maintained, at resting levels. There is wide acceptance of this benefit from Orbit sugar-free gum where restoration of plaque pH to resting levels is known to be rapid. Consequently, attention is now focusing on whether gums containing sucrose exert a similar benefit.

The new study using Doublemint chewing gum after meals shows that once the sucrose is chewed out (generally within minutes)<sup>4</sup>, the gum behaves in much the same way as sugar-

free gum, with acid neutralisation being completed within a 20 minute chew period.<sup>3</sup>

**Interproximal plaque pH response to typical nutritionally balanced meal with and without sucrose chewing gum.<sup>3</sup>**



Since most people chew a piece of gum for at least 20 minutes these early results suggest that whichever gum your patients elect to chew after eating, plaque acid can be neutralised much faster than by not chewing.

The new research data provides further support as to why the chewing of gum for 20 minutes after eating should be considered a valuable adjunct in maintaining good dental health.



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